



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

Azure Group LLC
Agape Haven Adult Family Home
4630 E Sumac Dr
Spokane, WA 99223

RE: Agape Haven Adult Family Home License # 755301

Dear Provider:

This letter addresses Compliance Determination(s) 34166 (Completion Date 12/19/2023) and 32093 (Completion Date 11/13/2023).

The Department completed a follow-up inspection of your Adult Family Home on 12/19/2023 and found that you have corrected the violations listed in the Full report dated 11/13/2023. Your home is back in compliance as of 11/13/2023 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 388-76-10265-1-d, WAC 388-76-10175-1

The Department staff who did the on-site verification:

Selena Clemons, NCI-Complaint Investigator

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

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



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Statement of Deficiencies	License #: 755301	Compliance Determination #32093
Plan of Correction	Agape Haven Adult Family Home	Completion Date
Page 1 of 3	Licensee: Azure Group LLC	11/13/2023

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 11/03/2023 and 11/03/2023 of:

Agape Haven Adult Family Home
4630 E Sumac Dr
Spokane, WA 99223

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

The department staff that inspected the Adult Family Home:

Emily Crook, Long Term Care Surveyor/AFH

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

11/28/2023

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.

Sharon Ambarka
Provider (or Representative)

12/13/2023
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 within three days of employment for 1 of 4 staff (Staff D). This failure placed residents at risk for exposure to a contagious air born respiratory illness.

Findings included...

Record review of Staff D, Caregiver, employee file showed they were hired on 03/01/2022. Their record showed they had completed a one-step TB test on 09/06/2022. There was no documentation to show the second step TB test had been completed. Staff B's employee file showed they had an x-ray completed on 07/21/2023.

During an interview with Staff A, Provider, on 11/03/2023, they stated new staff need to have a TB test done within 3 days of hire.

Staff A stated during an interview on 11/13/2023 at 11:01 AM, that Staff D had gotten their first step, and they did not get their second step completed. Staff A stated they reviewed their records in July 2023 and realized Staff D had never gotten their second step TB test and had them go in and get a chest x-ray.

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, Agape Haven Adult Family Home is or will be in compliance with this law and / or regulation on
(Date) 11/13/2023.

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

Sharon Ambak

Provider (or Representative)

12/13/2023

Date

WAC 388-76-10175 Background checks Employment Conditional hire Pending results of Washington state name and date of birth background check. An adult family home may conditionally employ a person directly or by contract, pending the result of a Washington state name and date of birth background check, provided the home:

(1) Submits the Washington state name and date of birth background check no later than one working day after conditional employment;

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure a Washington state name and date of birth background check was submitted within one working day of hire for 1 of 4 current staff (Staff B). This failure placed residents at risk for receiving care from an unqualified staff member.

Findings included...

Review of staff records showed Staff B, Caregiver, was hired on 01/01/2023. Their Washington state name and date of birth (NDOB) background check was completed on 03/06/2023.

Staff A, Provider, stated during an interview on 11/03/2023 at 2:18 PM, they had expected to get Staff B's NDOB background check from their previous employer, but they were unable to get a copy. Staff A stated they know a NDOB background check needs to be run within the first three days of hire.

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, Agape Haven Adult Family Home is or will be in compliance with this law and / or regulation on

(Date) 11/13/2023.

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

Sharon Ambak

Provider (or Representative)

11/13/2023

Date