STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Hope Home Inc
Hope Guest Home
915 S 7th St
Tacoma, WA 98405

RE: Hope Guest Home License # 2057

Dear Administrator:

This letter addresses Compliance Determination(s) 46668 (Completion Date 09/03/2024) and 41150 (Completion Date 06/03/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/03/2024 and found no deficiencies. Your facility meets the Assisted Living Facility licensing requirements.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2610-1, WAC 388-78A-2610-2-c, WAC 388-78A-2480, WAC 388-78A-2480-2, WAC 388-78A-2480-1

The Department staff who did the on-site verification:
Cathleen Davis, ALF Licensor
Cory Myers, ALF Complaint Investigator

If you have any questions, please contact me at (253)442-3013.

Sincerely,

Manfay Chan, Field Manager
Region 3, Unit D
Residential Care Services

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Statement of Deficiencies	License #: 2057	Compliance Determination # 41150
Plan of Correction	Hope Guest Home	Completion Date
Page 1 of 4	Licensee: Hope Home Inc	06/03/2024

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Assisted Living Facility license.

The department completed data collection for the unannounced on-site full inspection on 05/13/2024 and 05/14/2024 of:
Hope Guest Home
915 S 7th St
Tacoma, WA 98405

The following sample was selected for review during the unannounced on-site visit: 5 of 16 current residents and 3 former residents.

The department staff that inspected the Assisted Living Facility:

Cathleen Davis, ALF Licensor
Cory Myers, ALF Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit D
PO Box 99250
Lakewood, WA 98496

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.

Residential Care Services

06/07/2024
Date

I understand that to maintain an Assisted Living Facility license, the facility must be in compliance with all the licensing laws and regulations at all times.

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

PO Box 99250, Lakewood, WA 98496

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915 S 7th St
Tacoma, WA 98405

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Residential Care Services, Region 3 , Unit D
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Residential Care Services _____ Date _____

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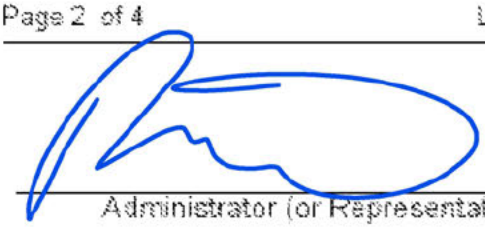

Administrator (or Representative)

06/10/2024

Date

WAC 388-78A-2610 Infection control.

(1) The assisted living facility must institute appropriate infection control practices in the assisted living facility to prevent and limit the spread of infections.

(2) The assisted living facility must:

(c) Provide staff persons with the necessary supplies, equipment and protective clothing for preventing and controlling the spread of infections;

This requirement was not met as evidenced by:

Based on record reviews and interview the Assisted Living Facility (ALF) failed to have 6 of 6 sampled staff (Staff A, B, C, D, E and F) fit tested for a N95 Respirator (A device worn over the mouth and nose or entire face that prevents inhalation of dust, and other substances). This failure placed all residents as well as staff and visitors to the facility at risk of potential harm if highly communicable pathogens were present.

Findings included...

Record review of the document titled L&I (Labor and Industries) and Department of Health (DOH) Respirator and Personal Protection Equipment (PPE) guidance for Long Term Care: Employer responsibilities for respiratory protection program and provision of PPE," dated 03/30/2021, showed "The Long-term care facilities (LTCF) are required to provide initial fit tests for each Health Care Worker (HCW) with the same model, style, and size respirator (N-95) that the HCW will be required to wear for protection against the COVID-19 (Corona Virus Disease 2019-an infectious disease caused by a virus causing respiratory illness with symptoms including cough, fever, new or worsening malaise, sore throat, headache, or new dizziness, nausea, vomiting, diarrhea, loss of taste or smell, and in severe cases difficulty breathing that could result in severe impairment or death and other airborne hazards). A 'fit test' is a procedure that tests the seal between the respirator's face piece and the HCW's face. It includes a medical evaluation and is completed by someone who is trained to fit test which takes a minimum of 15-20 minutes. The 'fit test' is to be completed every 12 months."

Record review of Washington State (WA) Department of Health (DOH) website document titled, "Respiratory Protection Program for Long-Term Care Facilities," undated, under the section titled, "fit testing," showed respirator fit testing was to be done before use of N95 respirator and then every year (within 12 months of the date of the last fit test).

Administrator (or Representative) Date

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Record review of the Department of Health document, titled, "Respiratory Protection Program for Long-Term Care Facilities," undated, showed "providing your workforce with respiratory protection against respiratory hazards, such as the virus that causes COVID-19, is a safety standard regulated and enforced by the Washington Department of Labor and Industries (L&I). Employers have an obligation to protect their employees from hazards in the workplace (General Duty WAC 296-126-094). In healthcare facilities, the tight-fitting disposable 'N95' respirator is a commonly used for respiratory protection. Respirator fit testing ensures that tight-fitting respirators seal properly and helps protect employees from exposure to airborne particles such as viruses and bacteria. Keep your employees safe and working by getting them fit tested and ready to properly use a respirator."

WAC 296-842-12010 Keep respirator program records. "(1) A written copy of the current respirator program must be kept by the employer. (2) Keep each employee's current fit test record, if fit testing is conducted, until the next fit test is administered. Fit test records must include: (a) Employee name; (b) Test date; (c) Type of fit test performed; (d) Description (type, manufacturer, model, style, and size) of the respirator tested; (e) Results of fit tests, for example, for quantitative fit tests include the overall fit factor and a printout, or other recording of the test."

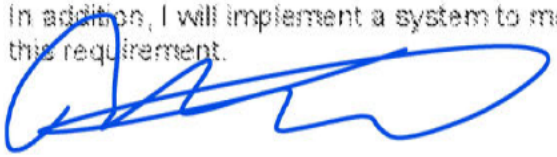
Record review of OSHA's Respiratory Protection standard 29 CFR 1910.134, undated, showed under section "1910.134(m) Recordkeeping. This section requires the employer to establish and retain written information regarding medical evaluations, fit testing, and the respirator program. This information will facilitate employee involvement in the respirator program, assist the employer in auditing the adequacy of the program, and provide a record for compliance determinations by OSHA."
A review of facility's records did not find they have a current Respiratory Protection Program fit testing program active and in place.

In an interview on 05/14/2024 at 4:30 pm Staff A, Executive Director (ED) said the facility did not have a Respiratory Protection Program (RPP) in place. Facility records were requested for the RPP. Staff A (ED) said there were no records for this program.

Plan/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, Hope Guest Home is or will be in compliance with this law and / or regulation on (Date) 06/30/2024 .

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



06/10/2024

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In an interview on 05/14/2024 at 4:30 pm Staff A, Executive Director (ED) said the facility did not have a Respiratory Protection Program (RPP) in place. Facility records were requested for the RPP. Staff A (ED) said there were no records for this program.

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Administrator (or Representative) Date

WAC 388-78A-2480 Tuberculosis Testing Required.

(1) The assisted living facility must develop and implement a system to ensure each staff person is screened for tuberculosis within three days of employment.

(2) For purposes of WAC 388-78A-2481 through 388-78A-2489 , "staff person" means any assisted living facility employee or temporary employee of the assisted living facility, excluding volunteers and contractors.

This requirement was not met as evidenced by:

Based on interview and record reviews the Assisted Living Facility failed to keep a record of a requested test for tuberculosis (TB, a communicable disease) for 1 of 6 sampled staff (Staff A). This failure placed all ALF residents, staff, and visitors at potential risk of TB infection by not having a record of tuberculosis testing.

Findings included...

On 05/14/2024 at 11:34 AM during an interview with Staff A, Executive Director (ED) said they did not have a record of tuberculosis testing for themselves.

Record Review showed Staff A was hired by the ALF in 05/15/2007 as the owner and Executive Director of the ALF. Staff A did not have a record of tuberculosis testing in the facility.

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