



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032-2388

April 28, 2016

Elvira C Velasquez
Frank Velasquez
EDGEWOOD MANOR AFH IN KENT
PO BOX 2023
MILTON, WA 98354

RE: EDGEWOOD MANOR AFH IN KENT License #752361

Dear Provider:

On April 27, 2016 the Department completed a review of communication and / or documents from you indicating that you have corrected the deficiency or deficiencies cited in the report/s dated February 11, 2016.

Based on the review of this information the Department finds the deficiency or deficiencies have been corrected. Your home meets the adult family home licensing requirements.

The Department staff who did the off-site verification:
Dorothy Talbot, Licensors

If you have any questions please, contact me at (253) 234-6007.

Sincerely,

Delores Usea, Field Manager
Region 2, Unit G
Residential Care Services



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Statement of Deficiencies	License #: 752361	Completion Date
Plan of Correction	EDGEWOOD MANOR AFH IN KENT	February 11, 2016
Page 1 of 3	Licensee: FRANK & ELVIRA	

You are required to be in compliance with all of the licensing laws and regulations at all times to maintain your adult family home license.

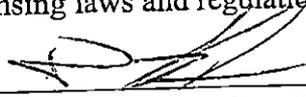
The department has completed data collection for the unannounced on-site full inspection of:
 2/5/2016

EDGEWOOD MANOR AFH IN KENT
 20201 108TH AVE SE
 KENT, WA 98031

The department staff that inspected the adult family home:
 Dorothy Talbot, MN, Licensor

From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 2, Unit G
 20425 72nd Avenue S, Suite 400
 Kent, WA 98032-2388
 (253)234-6007

As a result of the on-site full inspection 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

2/18/16
 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.


 Provider (or Representative)

2/29/2016
 Date

RECEIVED
 MAR 03 2016
 DSHS/ALTSA/RCS

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:

- (1) An initial skin test within three days of employment; and
- (2) A second test done one to three weeks after the first test.

This requirement was not met as evidenced by:

Based on observation, interview and record review the adult family home failed to ensure a two-step Tuberculosis (TB) skin test was performed for one of four staff (Staff B). This failure placed six of six residents (Resident #1,#2,#3, #4, #5 and #6) at risk of exposure to a communicable disease.

Findings include:

All observation, interviews and record reviews occurred on 2/5/16 unless otherwise noted.

Staff B was observed giving care to residents on the day of visit. Staff B was identified by the Provider as a live-in caregiver and worked six days a week.

Review of Staff personnel and staff training records were revealed. Staff B was hired on 7/1/14. His one-step TB test was performed on 5/8/14. According to the Co-Provider Staff B had two-step TB test done in the previous home and she had just performed a one-step TB test. However there was no two-step TB test results available in the AFH.

* The Provider said he had the TB documents in his home in the binder.

** I certify we had them, but unable to locate them.*

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, EDGEWOOD MANOR AFH IN KENT is or will be in compliance with this law and / or regulation on (Date) 2/29/2016. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)

2/29/2016

Date

WAC 388-76-10290 Tuberculosis Positive test result. When there is a positive result to tuberculosis skin or blood testing the adult family home must:

- (3) Follow the recommendation of the person's health care provider.

This requirement was not met as evidenced by:

Based on interview and record review the adult family home failed to ensure one of four Staff (Staff C) followed the recommendation of their health care provider when there was a positive Tuberculosis (TB) result. This failure placed six of six residents (Resident #1,2,3,4,5,6) at risk of exposure to a communicable disease.

RECEIVED
MAR 03 2016
DSS/SLTSA/RCS

Findings include:

All interview and record review occurred on 2/05/16 unless otherwise noted.

During inspection, staff Personnel and training records were reviewed. Staff C was hired on 2/11/15. Her two-step skin test for TB was not available in the home. A one step skin test result dated 5/16/11 was in the home. Amongst her TB records there was one dated 4/1/13 that documented a Chest X ray which was performed on 3/28/13 and was negative indicating no active tuberculosis. The individual had been referred for prophylactic treatment and instructed Staff C to "follow up with your provider."

The provider said he thought the caregiver had a follow-up with her doctor. The Provider called Staff C and she faxed another copy of Chest X ray on 11/16/15 with hand written note marked "TB screening, no evidence of active TB." There was no note by the Physician that Staff C did not need prophylactic treatment as recommended.

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, EDGEWOOD MANOR AFH IN KENT is or will be in compliance with this law and / or regulation on (Date) _____. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

Provider (or Representative)

Date