



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave, Suite 200, Vancouver, WA 98684

Touchmark At Fairway Village, LLC
Touchmark at Fairway Village
2911 SE Village Loop
Vancouver, WA 98683

RE: Touchmark at Fairway Village License # 1189

Dear Administrator:

This letter addresses Compliance Determination(s) 17883 (Completion Date 12/29/2022) and 15608 (Completion Date 11/09/2022).

The Department completed a follow-up inspection of your Assisted Living Facility on 12/29/2022 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, WAC 388-78A-2610-1, WAC 388-78A-2610-2, WAC 388-78A-2610-2-d,
WAC 388-78A-2610-2-f

The Department staff who did the on-site verification:
Jacob Ubl, ALF NCI CI

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

Sincerely,

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

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



Residential Care Services Investigation Summary Report

Provider/Facility: Touchmark at Fairway Village	Provider Type: Assisted Living Facility
License/Cert.#: 1189	Intake ID: 56574
Compliance Determination #: 15608	Region/Unit #: RCS Region 3 / Unit E
Investigator: Clinton Fridley	
Investigation Date(s): 11/01/2022 through 11/09/2022	
Complainant Contact Date(s):	

Allegation(s):

1. Infection Control: Facility failed to notify the department and local health department of a COVID-19 outbreak, and failed to maintain fit testing of staff.

Investigation Methods:

Sample:	Total residents: 110 Resident sample size: 110 Closed records sample size: 0
Observations:	Identified resident Residents Resident rooms Staff to resident interactions Resident to resident interactions
Interviews:	Identified resident Identified staff Residents management local health department
Record Reviews:	medical records incident reports fit testing records policies

Investigation Summary:

1. Infection Control: facility failed to notify department and local health department regarding the covid outbreak and failed to make sure all staff were wearing fit tested N95's while caring for COVID-19 positive residents, and failed to make sure fit testing was done annually resulting in most staff not being current for fit testing, failed practice identified.

Conclusion / Action:

☒ Failed Provider Practice Identified / Citation(s) Written

☐ Failed Provider Practice Not Identified / No Citation Written

☐ N/A



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Statement of Deficiencies	License #: 1189	Compliance Determination # 15608
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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 an unannounced on-site complaint investigation on 11/01/2022 and 11/09/2022 of:

Touchmark at Fairway Village
2911 SE Village Loop
Vancouver, WA 98683

This document references the following complaint number(s): 55054, 56574

The following sample was selected for review during the unannounced on-site visit: 110 of 110 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Clinton Fridley, NCI, ALF Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3, Unit E
800 NE 136th Ave, Suite 200
Vancouver, WA 98684

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.

Cory Cianeros
Residential Care Services

11/16/2022

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.

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


Administrator (or Representative)

11-25-22
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:

(d) Provide all resident care and services according to current acceptable standards for infection control;

(f) Report communicable diseases in accordance with the requirements in chapter 246-100 WAC.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the facility failed to ensure required infection control measures were being followed to prevent the spread of COVID-19 (Coronavirus Disease 2019, a respiratory illness). Facility staff failed to appropriately wear fit-tested N95 respirators when caring for COVID-19 positive residents, the facility failed to fit test staff annually as required and failed to immediately notify the Department and the local health department regarding a COVID-19 outbreak. These failures placed all 110 of 110 residents, staff, and visitors at risk of contracting and spreading COVID-19.

Findings included...

Notification of Infectious Outbreak

The Centers for Disease Control and Prevention (CDC) website page, titled, "Interim Infection Prevention and Control Recommendation for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic," updated 09/23/2022, documented that health care facilities responding to COVID-19 transmission within the facility should always notify and follow the recommendations of public health authorities.

The Department of Health (DOH) document, titled, "Interim Recommendations for SARS-CoV-2 Infection Prevention and Control in Healthcare Settings," updated October 31, 2022, documented facilities should have a process for notifying the health department about suspected or confirmed COVID-19 cases.

On 11/01/2022 at 10:25 AM, during an interview, Staff A, Registered Nurse (RN), Health Services Director (HSD) stated that the facility was currently in a COVID-19 outbreak with two residents in the memory care unit, and one on the assisted living side and that the first

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resident tested positive on 10/28/2022 or 10/29/2022. Staff A stated she had not notified the local health department nor had she notified the Department.

Review of an email received by the local health department on 11/01/2022 at 10:56 AM, documented that the local health department had not received notification of a facility COVID-19 outbreak by phone, email or online submission.

N95 use and N9 fit testing

The CDC website page, titled, "Interim Infection Prevention and Control Recommendation for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic," updated 09/23/2022, documented that all health care professionals (HCP) who enter the room of a patient with suspected or confirmed COVID-19 infection should use a N95 or higher-level respirator.

The CDC website, titled, "Healthcare Respiratory Protection Resources" last reviewed 02/04/2021, had an infographic titled, "Summary of Respiration Fit Test Requirements," documented that all employees required to wear N95 filtering facepiece respirators were required to be fit tested and that a fit test was required before a respirator can be worn, yearly, and after any physical changes that may affect the fit of the respirator. Fit testing records, to include size and model of respirator, were required to be kept on file, by the facility, until the next annual test was performed.

The CDC website, titled, "Healthcare Respiratory Protection Resources" last reviewed 02/04/2021, had an infographic titled, "Why are annual FIT TESTS required?", documented that research confirms the need for annual testing and that respirator fit can change over time and if the respirator doesn't fit, it doesn't work.

The DOH document, titled, "Interim Recommendations for SARS-CoV-2 Infection Prevention and Control in Healthcare Settings," updated October 31, 2022, documented that HCP who have close contact with residents who were confirmed COVID-19 positive, or in observation/quarantine, wear a fit tested N95 and do not use surgical mask for COVID-19 positive residents or during Aerosol Generating Procedures (AGPs).

Review of facility's written respiratory protection program, undated, documented that team members who were in close contact with a patient or resident with suspected or confirmed COVID-19 infection must use a NIOSH-approved N95 filtering facepiece respirator or equivalent or higher-level respirator.

On 11/01/2022 at 11:47 AM, during an interview, Staff C, Medication Aide, stated that they have not been fit tested by the facility and when they have had to go into rooms where the resident was COVID-19 positive, had been wearing a surgical mask, underneath a N95 respirator. Staff C was asked if they were trained to wear a surgical mask under a N95

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mask, and Staff C stated "no."

On 11/01/2022 at 11:55 AM, during an interview, Staff D, caregiver, stated that they had been fit tested for a specific N95 respirator and explained donning/doffing procedure without difficulty.

Review of facility staff fit testing records documented that Staff D was last fit tested on 10/21/2021.

On 11/01/2022 at 1:09 PM, during an interview, Staff E, caregiver, stated they were not fit tested for a N95 and was currently wearing a black KN95 facemask.

On 11/01/2022 at 1:09 PM, during an observation, Staff E entered a COVID-19 positive resident room while wearing a KN95 mask.

On 11/01/2022 at 01:28 PM, during an interview, Staff F, Medication Aide, stated they were fit tested for a N95 mask two years ago and had not been re-fit tested since.

Review of facility staff fit testing records documented that Staff F was last fit tested on 06/24/2021.

Review of facility staff fit testing records documented the following:

- 73 staff members were due for an annual fit test as of June of 2022.
- 30 staff members were due for an annual fit test as of October of 2022.

On 11/01/2022 at 02:16 PM, during an interview, Staff A stated staff should be fit tested annually. Staff A stated that they were notifying the department and the local health department of the COVID-19 outbreak today.

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, Touchmark at Fairway Village is or will be in compliance with this law and / or regulation on (Date) 12/31/22

12/24/22 *DN*

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

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11/09/2022

Dawn Nalin

Administrator (or Representative)

11-25-22

Date

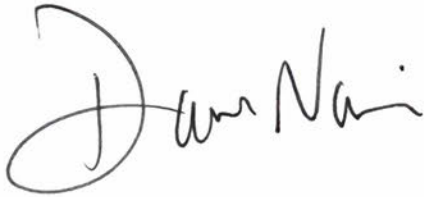
This document was prepared by Residential Care Services for the Locator website.

Plan of correction

ON 12-19-22 Columbia Safety is coming to fit test staff who have not been fit tested and who are due for fit testing. They will also train 3 staff members to perform fit testing. We will then have 5 staff members who can complete fit testing on a regular basis.

Each month fit testing will be conducted for new hires that need to be fit tested and anyone whose birthday is in that month who needs to be fit tested as a requirement of their role.

A record has been created which states each person who needs to have a fit test, the date their medical clearance needs to be renewed, the N95 mask they have been fit tested for, and the month their next fit test would be due.

A handwritten signature in black ink, appearing to read "Dan Nani". The signature is written in a cursive style with a large, looping initial "D".