



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

BARBARA BADGLEY
SERENE MEADOWS II
PO BOX 1300
DAVENPORT, WA 99122

RE: SERENE MEADOWS II License # 508400

Dear Provider:

This letter addresses Compliance Determination(s) 68168 (Completion Date 11/03/2025) and 65893 (Completion Date 10/06/2025).

The Department completed a follow-up inspection of your Adult Family Home on 11/03/2025 and found that you have corrected the violations listed in the Full report dated 10/06/2025. Your home is back in compliance as of 10/18/2025 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 388-76-10415-1, WAC 388-76-10350-2-d, WAC 388-76-10530-1, WAC 388-76-10530-1-a, WAC 388-76-10530-1-b, WAC 388-76-10530-1-c, WAC 388-76-10530-1-d, WAC 388-76-10530-1-e, WAC 388-76-10530-1-f, WAC 388-76-10530-1-g, WAC 388-76-10530-1-h, WAC 388-76-10522-6

The Department staff who did the on-site verification:

Jacqueline Block, AFH Licenser

If you have any questions, please contact me at (509)598-0182.

Sincerely,

Selena Clemons, Interim Community Field Manager
Region 1, Unit E
Residential Care Services



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Statement of Deficiencies	License #: 508400	Compliance Determination # 65893
Plan of Correction	SERENE MEADOWS II	Completion Date
Page 1 of 6	Licensee: BARBARA BADGLEY	10/06/2025

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 09/19/2025 of:

SERENE MEADOWS II
804 1st St
Davenport, WA 99122

The following sample was selected for review during the unannounced on-site visit: 5 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Jacqueline Block, AFH Licensors

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.

_____	_____
Residential Care Services	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)	Date

WAC 388-76-10415 Food services. The adult family home must:

- (1) Ensure that the safe food handling training requirements of chapter 388-112A WAC are met; and

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 4 of 6 staff (Staff B, C, D, & E) had a current safe food handling card. This failure placed residents at risk for foodborne illnesses.

Findings included...

Observation on 09/19/2025 showed Staff C, Caregiver, cooking and serving lunch to residents.

Record review of employee files on 09/19/2025 showed Staff B, Resident Manager, had a safe food handler card that expired on 02/24/2024 (564 days overdue).

Record review of employee files on 09/19/2025 showed Staff C, Caregiver, had a safe food handler card that expired on 04/07/2025 (165 days overdue).

Record review of employee files on 09/19/2025 showed Staff D, Caregiver, had a safe food handler card that expired on 02/24/2024 (564 days overdue).

Record review of employee files on 09/19/2025 showed Staff E, Caregiver, had a safe food handler card that expired on 05/09/2025 (133 days overdue).

During an interview on 10/06/2025 at 1:39 PM, Staff A, Provider stated staff records are usually reviewed every three months by Staff B, Resident Manager. Staff A stated that Staff B has been working a lot and did not have time to review staff records.

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, SERENE MEADOWS II 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 requirement.

Provider (or Representative)

Date

WAC 388-76-10350 Assessment Updates required.

(2) The adult family home must ensure each resident's assessment is reviewed and updated to document the resident's ongoing needs and preferences as follows:

(d) At least every 12 months.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure an assessment was reviewed and updated at least once every twelve months for 1 of 5 residents (Resident 2). This failure placed residents at risk for unmet care needs.

Findings included...

On 09/19/2025 review of resident records showed Resident 2's last assessment was completed on 06/26/2024. There was no documentation to show another assessment had been completed (85 days overdue).

In an interview 09/19/2025 at 11:05 AM, Staff B, Resident Manager, stated they switched nurse delegators and was not sure why Resident 2 did not have an assessment completed.

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, SERENE MEADOWS II 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 requirement.

Provider (or Representative)

Date

WAC 388-76-10530 Resident rights Notice of rights and services.

(1) The adult family home must provide each resident written notice of the resident's rights and services provided in the home in a language the resident understands and before the resident is admitted to the home. The notice must be reviewed at least once every 24 months from the date of the resident's admission and must include the following:

- (a) Information regarding resident rights, including rights under chapter 70.129 RCW;
- (b) A complete description of the services, items, and activities customarily available in the home or arranged for by the home as permitted by the license;
- (c) A complete description of the charges for those services, items, and activities, including charges for services, items, and activities not covered by the home's per diem rate or applicable public benefit programs;
- (d) The monthly or per diem rate charged to private pay residents to live in the home;
- (e) Rules of the home, which must not violate resident rights in chapter 70.129 RCW;
- (f) How the resident can file a complaint concerning alleged abandonment, abuse, neglect, or financial exploitation with the state hotline;
- (g) If the home will be managing the resident's funds, a description of how the home will protect the resident's funds; and
- (h) If the home does not serve residents who require assistance with evacuation due to a limit on their license, notice that residents living in the home whose status changes to require assistance will be discharged from the facility.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure that the home's Notice of Services was reviewed and signed every 24 months by 3 of 5 sampled residents (Residents 1, 2 & 5). This failure placed residents at risk for not understanding the services provided by the AFH.

Findings included...

Review on 09/19/2025 of Resident 1's records showed a copy of the notice of rights and services and the acknowledgement in their record signed and dated for 07/05/2023 (76 days overdue).

Review on 09/19/2025 of Resident 2's records showed a copy of the notice of rights and services and the acknowledgement in their record signed and dated for 07/05/2023 (76 days overdue).

Review on 09/19/2025 of Resident 5's records showed a copy of the notice of rights and services and the acknowledgement in their record signed and dated for 07/02/2023 (79 days overdue).

During an interview on 09/19/2025 at 11:45 AM, Staff B, Resident Manager, stated they must have forgotten to review the Notice of Rights and Services for Residents 1, 2 and 5.

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, SERENE MEADOWS II 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 requirement.

Provider (or Representative)

Date

WAC 388-76-10522 Resident rights Notice Policy on accepting medicaid as a payment source. The adult family home must fully disclose the home's policy on accepting medicaid or other public funds as a payment source. The policy must:

(6) Be signed and dated by the resident and kept in the resident record after signature.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure

that the home's Medicaid policy was provided to and signed by 1 of 4 sampled residents (Resident 4). This failure placed residents at risk for not understanding the AFH's policies about accepting Medicaid as a payment source.

Findings included...

Review of resident 4's record on 09/19/2025 showed that no Medicaid policy was available for review in the chart.

During an interview on 09/19/2025 at 11:13 AM, Staff B, Resident Manager, stated they did not know why there was not a signed and dated Medicaid policy in Resident 4's record.

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, SERENE MEADOWS II 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 requirement.

Provider (or Representative)

Date