STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

SERENITY WOODS LLC
SERENITY WOODS ADULT FAMILY HOME LLC
218 Main St # 308
Kirkland, WA 98033

RE: SERENITY WOODS ADULT FAMILY HOME LLC License # 633201

Dear Provider:

This letter addresses Compliance Determination(s) 66616 (Completion Date 10/02/2025) and 64788 (Completion Date 09/02/2025).

The Department completed a follow-up inspection of your Adult Family Home on 10/02/2025 and found that you have corrected the violations listed in the Full report dated 09/02/2025. Your home is back in compliance as of 10/07/2025 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 388-76-10201-1, WAC 388-76-10650-2-a, WAC 388-76-10650-2-b, WAC 388-76-10650-2-c

The Department staff who did the off-site verification:
Katherine Randall, Nursing Care Consultant, NCC

If you have any questions, please contact me at (206)914-5042.

Sincerely,

Renee' Bourque

Renee Bourque, Field Manager
Region 2, Unit I
Residential Care Services

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Statement of Deficiencies	License #: 633201	Compliance Determination # 64788
Plan of Correction	SERENITY WOODS ADULT FAMILY HOME LLC	Completion Date
Page 1 of 4	Licensee: SERENITY WOODS LLC	09/02/2025

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 08/29/2025 of:
SERENITY WOODS ADULT FAMILY HOME LLC
14413 SALAL DR
EDMONDS, WA 98026

The following sample was selected for review during the unannounced on-site visit: 3 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Katherine Randall, Nursing Care Consultant, NCC

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit I
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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.

Renae' Bourgue
Residential Care Services

09/15/2025
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)

10/01/2025
Date

WAC 388-76-10201 Succession plan.

(1) The adult family home must have a written plan addressing how they will continue to meet the requirements of this chapter and provide care and services to residents in the event that the provider or entity representative is unable to fulfill their duties in the home and make it available upon request of the department.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure there was a Succession Plan available. This failure placed 6 of 6 residents (Resident 1, 2, 3, 4, 5 and 6) at risk of not knowing how their care would be administered in the event of a Provider emergency.

Findings included...

Review of the AFH records, on 08/29/2025 at 2:45 PM, showed no Succession Plan available to review.

In an interview, on 08/29/2025 at 2:50 PM, Staff B (Entity Representative) stated they would contact the Provider to ask about the Succession Plan, and it would be sent to the department. The department did not receive the Succession Plan.

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, SERENITY WOODS ADULT FAMILY HOME LLC is or will be in compliance with this law and / or regulation on (Date) 09/11/2025 .

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

Provider (or Representative) — Date 10/01/2025

WAC 388-76-10650 Medical devices.

(2) Before a medical device with a known safety risk is used by a resident, the home must:

(a) Ensure an assessment has been completed that identifies the resident's need and ability to safely use the medical device;

(b) Provide the resident and his or her family or legal representative with information about the device's benefits and safety risks to enable them to make an informed decision about whether to use the device;

(c) Ensure the resident's negotiated care plan includes how the resident will use the medical device; and

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 6 residents (Resident 5) had the required safety assessment completed by a qualified assessor, a consent form completed and signed, or care planning related to the safe use of the [redacted] prior to Resident 5 using the medical device. This failure placed Resident 5 at risk of injury.

Findings included...

Record review showed Resident 5 was admitted to the AFH on [redacted]/2022 with multiple diagnoses including [redacted].

Observation, on 08/29/2025 at 11:50 AM, showed a half-length [redacted] in the up position on both sides of Resident 5's bed, while Resident 5 was in the bed.

Review of Resident 5's record showed no safety assessment completed by a qualified

assessor and no care planning in Resident 5's negotiated care plan related to the safe use of the [redacted]. There was no consent form detailing the risks and benefits of using [redacted] available in Resident 5's record.

In an interview, on 08/29/2025 at 2:45 PM, Staff B (Entity Representative) stated that they were not aware of the required documents for a medical device and would contact the Provider to complete and submit them to the department. The department did not receive any further documentation.

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, SERENITY WOODS ADULT FAMILY HOME LLC is or will be in compliance with this law and / or regulation on (Date) 10/07/2025 .

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

Provider (or Representative) — Date 10/01/2025