



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) 42478 (Completion Date 06/10/2024) and 41410 (Completion Date 05/20/2024).

The Department completed a follow-up inspection of your Adult Family Home on 06/10/2024 and found that you have corrected the violations listed in the Complaint report dated 05/20/2024. Your home is back in compliance as of 05/16/2024 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 388-76-10025-3

The Department staff who did the off-site verification:
Spomenka Hodzic, NCI

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

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

RECEIVED

JUN 05 2024

DSHS/ALTSR/RCS



STATE OF WASHINGTON
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20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 633201	Compliance Determination # 41410
Plan of Correction	SERENITY WOODS ADULT FAMILY HOME LLC	Completion Date
Page 1 of 3	Licensee: SERENITY WOODS LLC	05/20/2024

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 an unannounced on-site complaint investigation on 05/16/2024 and 05/16/2024 of:

SERENITY WOODS ADULT FAMILY HOME LLC
14413 SALAL DR
EDMONDS, WA 98026

This document references the following complaint number(s): 128308

The following sample was selected for review during the unannounced on-site visit: 2 of 5 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Spomenka Hodzic, NCI

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

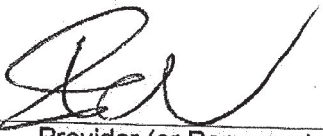
As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Renee Bourque
Residential Care Services

05/23/2024
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.

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



Provider (or Representative)

06/04/2024

Date

WAC 388-76-10025 License annual fee.

(3) The home must ensure that the department receives the annual license fee when it is due.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to pay the annual licensing fee of \$1,350.00 before the due date on 3/15/2024. This failure resulted in the AFH having an unpaid license fee since 3/16/2024.

Findings included...

Review of Review of Department's Safety, Tracking And Reporting System (STARS) on 05/16/2024 showed the AFH did not pay their annual licensing fee, and the Department database showed the balance of \$1,350.00.

Observation on 05/16/2023 at 9:35 AM, showed the AFH was operating and had five residents in their care.

In an interview, on 5/16/2024 at 9:43 AM, Staff A, the Provider, stated that they did not pay annual licensing fee because they did not get billing statement from the Department. Staff A stated that they would place a reminder on their outlook calendar to make sure they pay annual licensing fee when due. Staff A stated they would mail the payment immediately to the Department.

Review of the Departments invoice from the Office of Financial Recovery showed that Department have sent billing statement to the AFH on 01/15/2024.

This is a repeated deficiency previously cited on 05/31/2023.

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, SERENITY WOODS ADULT FAMILY HOME LLC is or will be in compliance with this law and / or regulation on (Date) 05/16/2024 check 5022 Cleared our Bank on 05/22/2024

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

Statement of Deficiencies

License #: 633201

Compliance Determination # 41410

Plan of Correction

SERENITY WOODS ADULT FAMILY HOME LLC

Completion Date

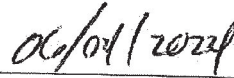
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Licensee: SERENITY WOODS LLC

05/20/2024



Provider (or Representative)



Date