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

LEANOS ADULT FAMILY HOME LLC
LEANOS ADULT FAMILY HOME LLC
4525 STRUMME RD
BOTHELL, WA 98012

RE: LEANOS ADULT FAMILY HOME LLC License # 750153

Dear Provider:

This letter addresses Compliance Determination(s) 40171 (Completion Date 04/23/2024) and 38869 (Completion Date 04/03/2024).

The Department completed a follow-up inspection of your Adult Family Home on 04/23/2024 and found that you have corrected the violations listed in the Complaint report dated 04/03/2024. Your home is back in compliance as of 04/04/2024 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 388-76-10380-4

The Department staff who did the off-site verification:
Meazawork Tekie, Complaint Investigator

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

Residential Care Services
Investigation Summary Report

Provider/Facility: LEANOS ADULT FAMILY HOME LLC
Provider Type: Adult Family Home
License/Cert.#: 750153
Intake ID: 123874
Compliance Determination #: 38869
Region/Unit #: RCS Region 2 / Unit I
Investigator: Meazawork Tekie
Investigation Date(s): 03/26/2024 through 04/03/2024
Complainant Contact Date(s):

Allegation(s):

1. The Adult Family Home (AFH) failed to protect resident the Named Resident 3 (NR3) from verbal abuse.

2. The Adult Family Home (AFH) failed to protect resident the Named Resident 1 (NR1) from verbal abuse.

3. The Adult Family home (AFH) failed to protect the Named Resident 3 (NR3) from sexual abuse.

4. The Adult Family home (AFH) failed to update the Negotiated Care Plan (NCP) for Named Resident 1 (NR1).

Investigation Methods:

Sample:	Total residents: 3 Resident sample size: 3 Closed records sample size: 0
Observations:	Identified resident Residents Activities Resident rooms Staff to resident interactions
Interviews:	Identified resident Identified staff Nursing staff Residents Family members
Record Reviews:	Medical records State reporting log Incident investigation Facility policies Personnel files Staff training records

Investigation Summary:

1. Observation showed AFH with 3 residents doing their daily activity comfortably.

Observation showed environment calm, staff were communicating with residents in a calm and respectful manner. In an interview, NR3 stated that Alleged Perpetrators (AP) only yelled at NR once and had apologized. In an interview, NR3 stated that their relationship has improved with the AFH care team and felt safe residing in the AFH/ In an interview, sampled residents and representatives stated that they were well cared for, choices were given regarding their care, and were cared with care and dignity. In an interview, AP admitted to rising their voice once to NR3 and stated they were apologetic. AP stated they were taking actions to prevent such incidents. In an interview, provider stated they were providing more breaks to AP to minimize caregiver burnouts. In record review, abuse prevention systems were documented.

2. Observation showed AFH with 3 residents doing their daily activity comfortably. Observation showed environment calm, staff were communicating with residents in a calm and respectful manner. In an interview, NR 1 denied being verbally abused during incontinence episodes. In an interview, NR 1s representative stated that NR1 were cared with care and dignity. In an interview, AP denied allegations. In record review, abuse prevention systems were documented.

3. Observation showed common area TV on showing news and NR in their room watching infomercial on their TV. In an interview, NR3 denied the allegations. NR3 stated if they didn't like the shows on the common area TV , they would come to their rooms to watch their show. In an interview, AFH staff denied the allegations. In an interview, AFH provider stated the TV shows put on in the house were all PG (Parental Guidance) rated.

4. Observation showed NR1 comfortably watching TV in their rooms. In an in interview, NR1 stated that AFH staff knew how to care for them and that they were well cared for. In an interview, AFH caregiver stated they forgot to update the care plans. Record review of Negotiate Care Plans (NCP) were not updated in the last 12 months. See statement of deficiency dated: 04/04/2024.

Conclusion / Action:

- [x] 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 #: 750153	Compliance Determination # 38869
Plan of Correction	LEANOS ADULT FAMILY HOME LLC	Completion Date
Page 1 of 2	Licensee: LEANOS ADULT FAMILY HOME LLC	04/03/2024

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 03/26/2024 and 03/26/2024 of:

LEANOS ADULT FAMILY HOME LLC
4525 STRUMME RD
BOTHELL, WA 98012

This document references the following complaint number(s): 123348, 123874

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

The department staff that investigated the Adult Family Home:

Meazawork Tekie, Complaint Investigator

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.

Rana' Bourqua
Residential Care Services

04/04/2024
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.

AK

Statement of Deficiencies	License #: 750153	Compliance Determination # 38869
Plan of Correction	LEANOS ADULT FAMILY HOME LLC	Completion Date
Page 2 of 2	Licensee: LEANOS ADULT FAMILY HOME LLC	04/03/2024

Provider (or Representative) Date

WAC 388-76-10380 Negotiated care plan Timing of reviews and revisions. The adult family home must ensure that each resident's negotiated care plan is reviewed and revised as follows:

(4) At least every twelve months.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure has a system in place to update the Negotiated Care Plan (NCP) for 1 of 3 sampled residents (Resident 3) at least every 12 months. This failure placed Resident 3 at risk for unrecognized and unmet care needs.

Findings included....

Review of Resident 3's record showed the AFH admitted Resident 3 on [redacted]/2014.

Resident 3's record showed their NCP was last revised and signed by Staff B (AFH Caregiver), and Resident 3's representative, on 03/11/2022. Resident 3's NCP was overdue by 24 months.

During an interview, on 03/22/2024 at 10:19 AM, Staff B stated that they forgot to update the NCP per departments' requirement.

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, LEANOS ADULT FAMILY HOME LLC is or will be in compliance with this law and / or regulation on (Date) 4/4/2024.

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

Angel S. Leano 4/4/2024

Provider (or Representative) Date

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