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

JOY FAMILY HOME LLC

JOY FAMILY HOME LLC
16921 SPRUCE WAY
LYNNWOOD, WA 98037

RE: JOY FAMILY HOME LLC License # 752375

Dear Provider:

This letter addresses Compliance Determination(s) 65631 (Completion Date 09/15/2025) and 65325 (Completion Date 09/10/2025).

The Department completed a follow-up inspection of your Adult Family Home on 09/15/2025 and found that you have corrected the violations listed in the Full report dated 09/10/2025. Your home is back in compliance as of 09/05/2025 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 388-76-10650-2-b, 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 388-76-10530-2, WAC 388-76-10530

The Department staff who did the off-site verification:
Hang Lu, Licensor

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

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

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 09/05/2025 of:
JOY FAMILY HOME LLC
16921 SPRUCE WAY
LYNNWOOD, WA 98037

The following sample was selected for review during the unannounced on-site visit: 2 of 3 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Hang Lu, Licensor

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

Statement of Deficiencies	License #: 752375	Compliance Determination # 65325
Plan of Correction	JOY FAMILY HOME LLC	Completion Date
Page 2 of 5	Licensee: JOY FAMILY HOME LLC	09/10/2026

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

09/11/2025
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.

Tsedale
Provider (or Representative)

09-11-2025
Date

WAC 388-76-10650 Medical devices.

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

(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;

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH) failed to have documentation of informed consent for 1 of 3 residents (Resident 1) to use the [redacted]. This failure placed Resident 1 at risk for not being fully aware of the risks associated with the [redacted].

Findings included...

Record review showed the AFH admitted Resident 1 on [redacted]/2015. Review of Resident 1's record showed Resident 1 had a Resident Representative (RR) who signed for them.

In an interview, on 09/05/2025 at 11:00 AM, Staff A, Entity Representative, reported that Resident 1 had [redacted].

Review of Resident 1's record showed there was no documentation to indicate Staff A had provided Resident 1's RR with information regarding the safety risks associated with the use of [redacted].

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

09/11/2025
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)

Date

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Based on observation, record review, and interview, the Adult Family Home (AFH) failed to have documentation of informed consent for 1 of 3 residents (Resident 1) to use the [redacted]. This failure placed Resident 1 at risk for not being fully aware of the risks associated with the [redacted]

Findings included...

Record review showed the AFH admitted Resident 1 on [redacted]/2015. Review of Resident 1's record showed Resident 1 had a Resident Representative (RR) who signed for them.

In an interview, on 09/05/2025 at 11:00 AM, Staff A, Entity Representative, reported that Resident 1 had [redacted]

Review of Resident 1's record showed there was no documentation to indicate Staff A had provided Resident 1's RR with information regarding the safety risks associated with the use of [redacted]

Statement of Deficiencies	License #: 752375	Compliance Determination #65325
Plan of Correction	JOY FAMILY HOME LLC	Completion Date
Page 3 of 5	Licensee: JOY FAMILY HOME LLC	09/10/2025

Observation and interview, on 09/05/2025 at 11:10 AM, showed Resident 1 had half-length [redacted] (one on each side of their bed) in raised position. Staff A could not find documentation of informed consent in Resident 1's record. Staff A stated that they would print a copy of the Guide to Bed Safety pamphlet to send to Resident 1's RP to review and sign right away.

Review of documents, received by the Department on 09/05/2025, showed the AFH sent a copy of the Guide to Bed Safety pamphlet and a separate piece of paper that had a signature with no date.

Review of documents, received by the Department on 09/09/2025, showed the AFH sent a copy of the Guide to Bed Safety pamphlet that had the electronic signature of Resident 1's RP and dated 09/05/2025.

In a phone interview, on 09/09/2025 at 10:15 AM, Staff A stated that they would keep all documents regarding the [redacted] in Resident 1's record moving forward.

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, JOY FAMILY HOME LLC is or will be in compliance with this law and / or regulation on (Date) 09-05-2025

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

Tsedey6 — Provider (or Representative)

09-11-2025 — 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 activites not covered by the home's per diem rate or applicable public benefit programs;

Observation and interview, on 09/05/2025 at 11:10 AM, showed Resident 1 had half-length [redacted] (one on each side of their bed) in raised position. Staff A could not find documentation of informed consent in Resident 1's record. Staff A stated that they would print a copy of the Guide to Bed Safety pamphlet to send to Resident 1's RR to review and sign right away.

Review of documents, received by the Department on 09/05/2025, showed the AFH sent a copy of the Guide to Bed Safety pamphlet and a separate piece of paper that had a signature with no date.

Review of documents, received by the Department on 09/09/2025, showed the AFH sent a copy of the Guide to Bed Safety pamphlet that had the electronic signature of Resident 1's RR and dated 09/05/2025.

In a phone interview, on 09/09/2025 at 10:15 AM, Staff A stated that they would keep all documents regarding the [redacted] in Resident 1's record moving forward.

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, JOY FAMILY HOME LLC 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.

(2) Upon receiving the notice of rights and services at admission and at least every 24 months, the home must ensure the resident and a representative of the home sign and date an acknowledgement stating that the resident has received the notice of rights and services as outlined in this section. The home must retain a signed and dated copy of both the notice of rights and services and the acknowledgement in the resident's record.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to provide the Notice of Rights and Services (Admission Agreement) at least once every 24 months to 1 of 3 residents (Resident 2). This failure placed Resident 2 at risk for not being fully aware of their rights and the services provided by the home.

Findings included...

Review of Resident 2's records showed the AFH admitted Resident 2 on [redacted]/2019. Record review showed Resident 2 had a Resident Representative (RR) who signed for them.

Record review showed Resident 2's RR last signed the Admission Agreement on 04/10/2021. Record review showed there was no evidence Staff A, Entity Representative, gave the Admission Agreement to Resident 2's RR to review and sign again in April 2023 and April 2025.

In an interview, on 09/05/2025 at 11:20 AM, Staff A acknowledged that Resident 2's RR had not signed and dated the Admission Agreement in April 2023 and April 2025. Staff A stated that they would review the Admission Agreement with Resident 2's RR and obtain their signature soon.

Review of documents, received by the Department on 09/06/2025, showed Staff A sent a copy of the signature page of the Admission Agreement, signed by Resident 2's RR and dated 09/06/2025.

Statement of Deficiencies	License #: 752375	Compliance Determination #65325
Plan of Correction	JOY FAMILY HOME LLC	Completion Date
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In an interview, on 09/09/2025 at 12:05 PM, Staff A stated that they would make sure to provide the Admission Agreement to the RR to review and obtain their signature at least every 24 months.

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, JOY FAMILY HOME LLC is or will be in compliance with this law and / or regulation on (Date) 09-05-2025

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

Tsedale — Provider (or Representative)

09-11-2025 — Date

In an interview, on 09/09/2025 at 12:05 PM, Staff A stated that they would make sure to provide the Admission Agreement to the RR to review and obtain their signature at least every 24 months.

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, JOY FAMILY HOME LLC 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