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

Bon AFH @ Mill Creek, LLC
Bon AFH @ Mill Creek
13212 30th Dr SE
Mill Creek, WA 98012

RE: Bon AFH @ Mill Creek License # 752663

Dear Provider:

This letter addresses Compliance Determination(s) 56328 (Completion Date 03/13/2025) and 53553 (Completion Date 01/31/2025).

The Department completed a follow-up inspection of your Adult Family Home on 03/13/2025 and found that you have corrected the violations listed in the Full report dated 01/31/2025. Your home is back in compliance as of 03/10/2025 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 388-76-10165-1, WAC 388-76-10165-1-a, WAC 388-76-10165-1-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 388-76-10530-2, WAC 388-76-10530, WAC 388-76-10320-10, WAC 388-76-10320-10-a, WAC 388-76-10320-10-b, WAC 388-76-10750-1, WAC 388-76-10705-2-c

The Department staff who did the on-site verification:
Hang Lu, Licensor
Chrissy Exe, Long-Term Care 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 01/23/2025 of:

Bon AFH @ Mill Creek
13212 30th Dr SE
Mill Creek, WA 98012

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 inspected the Adult Family Home:

Hang Lu, Licensor
Chrissy Exe, Long-Term Care 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

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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.

Raquel Barragan
Residential Care Services

02/03/2025
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)

02/11/2025
Date

WAC 388-76-10165 Background checks Washington state name and date of birth background check Valid for two years National fingerprint background check Valid indefinitely.

(1) A Washington state name and date of birth background check is valid for two years from the initial date it is conducted. The adult family home must ensure:

(a) A new DSHS background authorization form is submitted to the department's background check central unit every two years for each individual listed in WAC 388-76-10161 ;

(b) There is a valid Washington state background check for all individuals listed in WAC 388-76-10161 .

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH) failed to have valid Washington State Name and Date of Birth (WNDOB) Background Inquiry (BGI) for 4 of 9 caregivers (Staff A, E, G, and H). This failure placed residents at risk of being cared for by staff with unknown criminal backgrounds.

Findings included...

Observation, on 01/23/2025 at 11:05 AM, showed Staff E, Caregiver, was working in the AFH.

Review of staff records showed the WNDOB BGI for Staff A. Entity Representative, had expired on 10/15/2024.

Review of staff records showed the AFH hired Staff E on 01/20/2025. Record review

showed Staff E did not have any valid WNDOB BGI. (Refer to WAC 388-76-10163 and WAC 388-76-10175 [1])

Review of staff records showed the AFH hired Staff G, Former Caregiver, on 10/02/2020. Record review showed Staff G last worked in the home on 07/18/2024. Record review showed Staff G's WNDOB BGI had expired on 10/02/2022. Record review showed the AFH did not have a copy of Staff G's valid WNDOB BGI (for the entire duration of Staff G's employment in the home).

Record review showed Staff H, Former Caregiver, worked in the AFH from 09/15/2021 to 06/23/2022 and again from 02/09/2024 to 07/18/2024. Record review showed Staff H's WNDOB BGI had expired on 09/15/2023. Record review showed the AFH did not have Staff H's valid WNDOB BGI (for the second period [02/09/2024 to 07/18/2024] that Staff H worked in the home). (Refer to WAC 388-76-10163)

In an interview, on 01/23/2025 at 1:45 PM, Staff B, Resident Manager, stated that they would check with Staff A to see if they had renewed the BGI. At 2:54 PM, Staff B stated that they had not run the WNDOB BGI for Staff E yet since Staff E had only started working a few days earlier. At 3:09 PM, Staff B said they couldn't print the BGI results because their printer was broken.

Review of documents, received by the Department on 01/24/2025, showed the AFH sent Staff A's WNDOB BGI, dated 01/23/2025.

Review of document, received by the Department on 01/28/2025, showed the AFH sent Staff E's WNDOB BGI, dated 01/23/2025.

In an email correspondence, dated 01/28/2025, Staff B indicated that they did not have any other WNDOB BGI for Staff G and H.

In a phone interview, on 01/28/2025 at 3:45 PM, Staff A stated that they had Staff E's WNDOB BGI, but they could not print the BGI result during the full inspection on 01/23/2025. Staff A and Staff B both stated that they would ensure all staff had valid WNDOB BGI moving forward.

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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, Bon AFH @ Mill Creek is or will be in compliance with this law and / or regulation on (Date) 01/23/2025 .

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

Provider (or Representative) Date 02/11/2025

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 twenty-four 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; and

(g) If the home will be managing the resident's funds, a description of how the home will protect the resident's funds.

(2) Upon receiving the notice of rights and services at admission and at least every twenty-four 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 Services (Admission Agreement) at least once every 24 months to 2 of 5

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residents (Residents 1 and 2). This failure placed the residents at risk for not being fully aware of their rights and the services provided by the home.

Findings included...

Review of Resident 1's record showed the AFH admitted Resident 1 on [redacted]/2020. Record review showed Resident 1 had a Resident Representative (RR) who signed for them. Record review showed Resident 1's RR last signed the Admission Agreement on 01/27/2022. Record review showed there was no evidence the AFH gave Resident 1's RR a copy of the Admission Agreement to review, sign, and date again in January 2024.

Review of Resident 2's record showed the AFH admitted Resident 2 on [redacted]/2022. Record review showed Resident 2 had a RR. Record review showed Resident 2's RR last signed the Admission Agreement on [redacted]/2022. There was no evidence the AFH gave Resident 2's RR a copy of the Admission Agreement to review, sign, and date again in [redacted] 2024.

In an interview, on 01/23/2025 at 12:02 PM, Staff B, Resident Manager, stated that they knew they were required to review the Admission Agreement and obtain signatures at least every two years. Staff B acknowledged the Admission Agreement was overdue for review and signatures for both Residents 1 and 2.

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, Bon AFH @ Mill Creek is or will be in compliance with this law and / or regulation on (Date) 01/24/25

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

[redacted] 01/24/25

Provider (or Representative) Date

WAC 388-76-10320 Resident record Content. The adult family home must ensure that each resident record contains, at a minimum, the following information:

(10) A current inventory of the resident's personal belongings dated and signed by:

(a) The resident; and

(b) The adult family home.

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This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have a current, signed, and dated Inventory of Personal Belongings (IPB) form for 3 of 5 residents (Residents 2, 3, and 4). This failure placed the residents at risk for lost, stolen, or misplaced personal property.

Findings included...

Review of Resident 2's record showed the AFH admitted Resident 2 on [redacted]/2022. Resident 2 had a Resident Representative (RR) who signed for them. Record review showed there was a blank IPB form on file. Resident 2 did not have a completed, signed, and dated IPB form by both Staff A, Entity Representative, and Resident 2's RR.

Review of Resident 3's record showed the AFH admitted Resident 3 on [redacted]/2025. Record review showed Resident 3 had a RR who signed for them. Record review showed there was no completed, signed, and dated IPB form in Resident 3's file.

Review of Resident 4's record showed the AFH admitted Resident 4 on [redacted]/2024. Record review showed there was a blank IPB form on file. Resident 4 did not have a completed, signed, and dated IPB form by both Staff A and Resident 4.

In an interview, on 01/23/2025 at 12:05 PM, Staff B, Resident Manager, stated that they would make sure the IPB was completed, signed, and dated for all residents.

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, Bon AFH @ Mill Creek is or will be in compliance with this law and / or regulation on (Date) 01/27/2025.

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

[redacted] 01/27/2025

Provider (or Representative) Date

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(1) Keep the home both internally and externally in good repair and condition with a safe, comfortable, sanitary, and homelike environment that is free of hazards;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to keep the home environment in good repair. This failure placed 5 of 5 residents (Residents 1, 2, 3, 4, and 5) at risk for a decreased quality of life.

Findings included...

Observation, on 01/23/2025 at 4:30 PM, showed the wood on the lower part of the door and door frame of Bedroom [redacted] (occupied by Residents 3 and 5) was chipped in several places. In addition, there were heavy scuff marks on the walls throughout the home.

In an interview, on 01/23/2025 at 4:30 PM, Staff B, Resident Manager, stated that the damage and scuff marks were caused by the residents' wheelchairs. Staff B stated that they would call the maintenance person to come to the AFH to fix the issues.

In a phone interview, on 01/28/2025 at 4:20 PM, Staff B reported that they had already fixed all the environmental issues.

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, Bon AFH @ Mill Creek is or will be in compliance with this law and / or regulation on (Date) 03/10/2025.

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

Provider (or Representative) Date 02/11/2025

WAC 388-76-10705 Common use areas.

(2) The adult family home must ensure common use areas are:

(c) Not used as bedrooms or sleeping areas.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure the resident common area was not used as a sleeping area by staff at night. This failure placed 5 of 5 residents (Residents 1, 2, 3, 4, and 5) at risk for a decreased quality of life.

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Findings included...

Observation of the AFH, on 01/23/2025 at 11:15 AM, showed Resident 2 and Resident 5 sitting on the couches in the family room watching TV.

Observation and interview, on 01/23/2025 at 5:05 PM, showed there was a room (designated as the home's office) across from Resident 1's bedroom. Staff A, Resident Manager, stated that the live-in caregivers (Staff C, D, and E) slept in the office.

In a phone interview, on 01/24/2025 at 1:38 PM, Staff C, Caregiver, stated that only one caregiver slept in the office at night and the other caregivers slept on the couches in the family room. Staff C stated that they took turns sleeping in the office at night. Staff C reported that they slept on the couches in the family room during the night to be available to address any care needs.

In a phone interview, on 01/28/2025 at 4:45 PM, Staff A, Entity Representative, stated that they had a mattress to put in the family room for staff to sleep. Staff A stated that the office could accommodate up to two caregivers to sleep at night with a bed and a mattress. Staff A stated that they would start using the vacant resident bedroom in addition to the office for staff to sleep at night until they were able to hire a caregiver for night shift.

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, Bon AFH @ Mill Creek is or will be in compliance with this law and / or regulation on (Date) 03/10/2025.

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

BBC Keke — Provider (or Representative)

02/11/2025 — Date

Plan of Correction

Deficiency #1 – WAC 388-76-10165 Background checks. Washington state name and date of birth background check valid for two years. National fingerprint background check valid indefinitely.

Bon AFH has noted the deficiency and has taken the following corrective actions on 1/23/25:

A. Moving forward we will make sure that when hiring someone we will submit name and date of birth background and fingerprint background check for the new hire.
B. We will also set calendar reminders for every month to check which employee needs to redo their background check to ensure they are valid.

Deficiency #2 – WAC 388-76-10530 Residents rights – notice of rights and services.

Bon AFH has noted the deficiency and will take the following corrective actions on 2/1/25:

We will ensure that we include the resident's rights and services in the admission process of each of our residents and we will set calendar reminders for every year to check which residents need to have a review of their rights and services to ensure we are complying.

Deficiency #3 – WAC 388-76-10320 Resident record content.

Bon AFH has noted the deficiency and will take the following corrective actions on 1/27/25:

We have ensured that all resident content has been recorded and signed and dated by the resident and adult family home.

Deficiency #4 – WAC 388-76-10750 Safety and maintenance.

Bon AFH has noted the deficiency and will take the following corrective actions on 1/27/25:

We have ensured that the home is in good repair by having a maintenance individual come and repair the chipped wood on the lower parts of the doors and removed the scuff marks on the walls by repainting the areas and fixing it where needed.

Deficiency #5 – WAC 388-76-10705 Common use areas.

Bon AFH has noted the deficiency and will take the following corrective actions on: No staff is sleeping in the common area. We are in the process of remodeling the layout of the home. The empty resident room is being used for caregivers while we are working on renovating the office/caregiver room and turning it into a pure caregiver room that will hold two beds and building an office in another area of the home. We anticipate being done with the renovations by 3/10/25.

1. ***Bon AFH*** **Entity Representative: Bonaventure Okeke, LPN.**

2. Admission Agreement

([redacted] -RESIDENT)

This agreement between Bon AFH@ Mill Creek and Dougherty, LEO J shall begin in Febuary, 1st 2020 and will remain in effect until; i. terminated by either party with 30 day-written notice, ii. Non-payment (partial or full) for more than 30 days, iii. Client passes away or iv. Bon AFH ceases to exist.

Bon AFH located at 13212 30th drive SE, Mill Creek, WA 98012, is licensed by the state of Washington as an adult family home under Chapter 17.128 RCW. Bedrooms have been inspected and approved to meet all city and state building codes.

Room [redacted] and [redacted] which are double occupancy rooms are designated [redacted] beds only. Rooms [redacted] & [redacted] has a shared bathroom for which there's a system to maintain privacy. Room [redacted] has a double door with porch access, which shall remain permanently locked for resident safety. The bathtub in the shared bathroom is permanently closed for the safety of the Residents.

Terms

1. Initial Assessment and Care Plan

Prior to admission, services will be determined based upon a written assessment made by the Department of Social and Human Service (DSHS). The assessment will include specific resident information including recent medical history, care needs and preferences, current prescribed medications, medical diagnosis, significant known chronic conditions, behaviors or symptoms, history of depression; anxiety and mental illness if any. Assessment will also cover social physical and emotional strengths and needs, functional abilities and evaluation of cognitive status and activity preferences. Before assigning a Resident to a double occupancy room, the assessment of each Resident will be reviewed for proper compatibility. The qualified assessor will complete a preliminary service plan that

describes the needs for services and an initial plan as to how to meet the needs identified in the assessment.

The primary physician must see the new resident within one month prior to admission. Bon AFH will clarify all orders for care with resident's primary physician. Bonaventure Okeke, LPN, will follow this up.

A care plan will be completed within 30 days of admission that describes how the staff will meet the needs of the resident identified in the assessment. This care plan will be completed in consultation with the resident and the legal representative if applicable, professionals involved with the resident, appropriate facility staff, Resident's DSHS case manager, any other party the resident wishes to include. It must be agreed to and signed by the resident or legal representative. The facility will notify the DSHS case manager, and the Resident's legal representative as soon as possible of any changes in the Resident's medical condition. The care plan will be re-evaluated yearly and at any time a significant change is noted.

2. Nurse Delegation Charges:

Any Resident meeting the criteria for a nurse delegation can be placed on delegation with their consent. Nurse delegation charges will be paid for by the DSHS, Bon AFH has a contract with Traci Tran RN, a qualified nurse delegator to train staff as needed. If any changes to this service, it will be communicated to residents by a 30 days notice. Staff are trained and qualified and willing to perform the nurse-delegation tasks.

3. Basic Services Provided:

Round-the-clock care by trained and licensed staff:

Bonaventure Okeke, L.P.N will typically be available at all times by phone 206-898-0285 or at 425-338-5830 and on site during the day, typically between 4 to 6 hours daily. He currently lives off-site. While on site his full attention will be dedicated to Bon AFH residents. General nursing care will be carried out by

Bonaventure Okeke Presently, Bon AFH will hire outside professionals to conduct yearly assessments.

Bonaventure Okeke, LPN has been licensed in Washington since 1993. His experience covers a wide range of specialties.

Room and Board are included in the monthly fee. All consumables such as personal hygiene supplies will be provided at no additional cost. Personal preferences for these items will be at client's expense.

Housekeeping and laundry

Beds are made daily and as needed. Linens / personal clothing are washed weekly and as needed.

Residents will be in clean clothes daily.

Bathrooms are cleaned and disinfected daily and as needed.

Ironing available and staff can assist when needed, dry cleaning at resident cost but coordinated by staff.

Rooms will be kept tidy daily by staff to insure resident's safety but also accommodate and respect residents' personal space and belongings.

Rooms will be thoroughly cleaned twice a week and more often as needed.

All soiled laundry will be kept sealed in the utility room and washed within six hours.

Potentially infectious material will not come in contact with kitchen or dining area. Preventing trans-contamination of infectious materials will be attained by rigorous hand - washing, using hand gel, and wearing gloves or protective gear.

Personal hygiene care: Residents will be offered a bath twice per week and as needed.

In-door and outdoor activities:

Entertainment, arts and crafts, poetry, book reading, puzzles, outdoor walks, daily exercises, church, Bingo, card games, movies and ice cream social.

Resident's personal property safekeeping & Liability:

The resident has the right to have and use personal property, space permitting, provided it does not endanger the health and safety of others. The facility shall protect and promote this right. Bon AFH will encourage family to keep most valuables home for better safe keeping to avoid loss or damage. In the event a resident does not have any representative to take the valuable home, the facility will try to protect the valuable in a private lock. Bon AFH does not manage the personal financial affairs of any resident.

All resident's belongings will be inventoried by staff at time of admission and a written log will be maintained in resident's file. This log is updated as needed. There is no charge for these services. Residents who no longer reside at Bon AFH will have 30 days to collect their belongings after which period of time belongings will be donated or discarded. There are no storage fees.

The resident and Bon AFH shall both take reasonable steps to ensure that the resident's property is not lost, stolen or damaged. Bon AFH (while licensed) carries all insurance policies with limits as mandated by the state of Washington. Liability insurance covers claims of $500,000 per occurrence and $1,000,000 in the aggregate.

Rates Regarding Telephone, Internet and Cable TV Service:

All local and long distance phone calls (excluding overseas) will be included in the monthly fees. Bon AFH will determine which service to use. Residents may have personal cell phones and take responsibility for billing. Presently we have Comcast services. Also WIFI access are available through out the house and Flat

screen TV is available in the day room. These services are included in the monthly fees. Residents may take telephone and devices to their rooms for privacy.