



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

#1* America's Best Adult Family Home LLC
#1* America's Best Adult Family Home LLC
14311 43rd Ave W
Lynnwood, WA 98087

RE: #1* America's Best Adult Family Home LLC License # 754309

Dear Provider:

This letter addresses Compliance Determination(s) 29749 (Completion Date 09/19/2023) and 27719 (Completion Date 08/10/2023).

The Department completed a follow-up inspection of your Adult Family Home on 09/19/2023 and found that you have corrected the violations listed in the Full report dated 08/10/2023. Your home is back in compliance as of 09/18/2023 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 388-76-10198-3, WAC 388-76-10198-4, WAC 388-76-10198-2-a, WAC 388-76-10230-3

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

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

Statement of Deficiencies	License #: 754309	Compliance Determination # 27719
Plan of Correction	#1* America's Best Adult Family Home LLC	Completion Date
Page 1 of 4	Licensee: #1* America's Best Adult Family Home	08/10/2023

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 08/04/2023 and 08/04/2023 of:

#1* America's Best Adult Family Home LLC
14311 43rd Ave W
Lynnwood, WA 98087

The following sample was selected for review during the unannounced on-site visit: 2 of 4 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

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

08/14/2023
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)08/20/2023

Date

WAC 388-76-10198 Adult family home Personnel records. The adult family home must keep documents related to staff in a place readily accessible to authorized department staff. These documents must be available during the staff's employment, and for at least two years following employment. The documents must include but are not limited to:

- (2) Staff orientation and training records pertinent to duties, including, but not limited to:
 - (a) Training required by chapter 388-112A WAC, including as appropriate for each staff person, orientation, basic training or modified basic training, specialty training, nurse delegation core training, and continuing education;
- (3) Tuberculosis testing results.
- (4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH) failed to have the personnel records for 4 of 5 caregivers (Staff A, B, D, and E) and a former caregiver (Staff F) readily available for review. This failure delayed verification of staff qualifications to work in the home and placed Residents 1, 2, 3, and 4 at risk of being cared for by staff who may not be fully qualified.

Findings included...

Observation, on 08/04/2023 at 10:45 AM, showed Staff A, Entity Representative, and two other caregivers (Staff B and C) working in the AFH.

Review of staff record showed Staff A did not have a copy of their Fingerprint (FP) Background Check (BGC) results on file.

Review of staff record showed the AFH hired Staff B on 03/20/2020. Record review showed Staff B did not have a copy of their FP BGC results on file.

Review of staff record showed the AFH hired Staff D, Caregiver, on 11/04/2020. Record review showed Staff D did not have the following documents on file: FP BGC results, Tuberculosis (TB) skin test results, Dementia and Mental Health Specialty Training certificates, and Nurse Delegation Focus on Diabetes training certificate.

Review of staff record showed the AFH hired Staff E, Caregiver, on 03/12/2020. Record review showed Staff E did not have a copy of their FP BGC and second step TB skin test result on file.

Review of staff record showed Staff F, Former Caregiver, worked in the AFH from 01/15/2023 to 05/20/2023. Record review showed Staff F did not have copies of their Washington State Name and Date of Birth BGC and FP BGC results on file.

In an interview, on 08/04/2023 at 12:30 PM, Staff A stated that they would ask Staff E to look for documents saved on the computer and send to the Department.

Review of documents, received by the Department on 08/07/2023, showed the AFH was still missing Staff D's documents and the FP BGC results for Staff A and Staff E.

Review of an email correspondence, dated 08/07/2023, showed Staff A reporting that Staff D had decided not to continue working in the AFH. Staff A stated that they had sent a request for a copy of the missing FP BGC results.

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, #1* America's Best Adult Family Home LLC is or will be in compliance with this law and / or regulation on	
(Date)	<u>9/26/2023</u> <i>Spoke with the provider on 8/25. She agreed to change the date to 9/18/23.</i>
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.	
 _____ Provider (or Representative)	<u>08/20/2023</u> _____ Date

WAC 388-76-10230 Pets. The adult family home must ensure any animal visiting or living on the premises:

(3) Has proof of up-to-date rabies vaccinations.

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH) failed to ensure the rabies vaccination was up to date for the dog living in the home. This failure placed 4 of 4 residents (Residents 1, 2, 3, and 4) at risk for health and safety risks associated with a viral exposure.

Findings included...

In an interview, on 08/04/2023 at 2:29 PM, Staff A, Entity Representative, stated that they had a dog in the home. Staff A stated that they would call the clinic to get a copy of the dog's rabies vaccination record right away.

Review of the dog's vaccination record showed the rabies vaccination had expired on 07/21/2023.

In an interview, on 08/04/2023 at 3:35 PM, Staff A stated that they had scheduled an appointment for the dog to get the rabies vaccine on 08/11/2023.

Observation, on 08/04/2023 at 4:30 PM, showed there was a dog on the upper level of the AFH.

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, #1* America's Best Adult Family Home LLC is or will be in compliance with this law and / or regulation on

(Date) 8/11/2023

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


Provider (or Representative)

08/20/2023
Date