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

Alemstehay LLC
Hope Adult Family Home
19628 82nd Pl W
Edmonds, WA 98026

RE: Hope Adult Family Home License # 754530

Dear Provider:

This letter addresses Compliance Determination(s) 53414 (Completion Date 01/22/2025) and 51756 (Completion Date 12/18/2024).

The Department completed a follow-up inspection of your Adult Family Home on 01/22/2025 and found that you have corrected the violations listed in the Full report dated 12/18/2024. Your home is back in compliance as of 12/13/2024 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 388-76-10265-1-d, WAC 388-76-10198-2-a

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

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Statement of Deficiencies	License #: 754530	Compliance Determination # 51756
Plan of Correction	Hope Adult Family Home	Completion Date
Page 1 of 4	Licensee: Alemstehay LLC	12/18/2024

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 the unannounced on-site full inspection on 12/12/2024 and 12/12/2024 of:
Hope Adult Family Home
19628 82nd Pl W
Edmonds, WA 98026

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

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.

Staci Daly, IDR PM for Region 2 I
Residential Care Services

January 17, 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)

1/18/2025
Date

WAC 388-76-10265 Tuberculosis Testing Required.

(1) The adult family home must develop and implement a system to ensure the following persons have tuberculosis testing within three days of employment:

(d) Caregiver;

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure 3 of 4 staff (Staff B, Caregiver, Staff C, Caregiver, and Staff D, Caregiver) obtained Tuberculosis (TB) testing within three days of hire. This failure placed Residents 1, 2, and 3 at risk for potential exposure to a communicable disease.

Findings included...

Review of staff records showed the AFH hired Staff B on 06/22/2024. Review of Staff B's record showed Staff B had a TB blood test on 08/22/2024 (with negative result). This TB blood test was not done within 3 days of hire.

Review of staff records showed the AFH hired Staff C on 05/15/2023. Review of Staff C's record showed Staff C had a TB skin test on 06/25/24 (with negative result). This TB skin test was not done within 3 days of hire. In addition, record review showed there was no documentation of a second TB skin test obtained one to three weeks after the first TB skin test. (Refer to WAC 388-76-10285).

Review of staff records showed the AFH hired Staff D on 12/01/2024. Review of Staff D's record showed Staff D had a TB skin test on 09/09/2024 (with negative result). This TB skin test was not done within three days of hire. In addition, record review showed Staff D did not have documentation of another TB skin test (one step) when they were hired. (Refer to WAC 388-76-10280).

In an interview, on 12/12/2024 at 2:10 PM, Staff A, Entity Representative, stated that they would ask Staff C about their other TB test. Staff A stated that Staff C also had a TB blood test. At 2:23 PM, Staff A stated that they would make sure all caregivers obtained TB screening within three days of hire, moving forward.

In a phone interview, on 12/13/2024 at 4:33 PM, Staff A stated that they would terminate Staff C on this day.

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, Hope Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 12/13/2024 .

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

Provider (or Representative) | Date 12/18/2025

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;

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have the personnel records for 2 of 4 staff (Staff A, Entity Representative, and Staff C, Caregiver) readily available for review. This failure placed Residents 1, 2, and 3 at risk of being cared for by staff who was not fully qualified.

Findings included...

Review of Staff A's records showed Staff A only had 2 hours of Continuing Education (CE) credits between their birthday in 01/2023 and 01/2024. Staff A did not have their other 10 hours of CE credits (between 01/2023 and 01/2024) available on file for review. Record review showed Staff A had 11 hours of CEs dated after 01/01/2024.

Review of staff records showed the AFH hired Staff C on 05/15/2023. Review of Staff C's record showed Staff C did not have evidence of their annual food safety training or Food Worker's card on file.

In an interview, on 12/12/2024 at 1:51 PM, Staff A stated that they had a lot of CE credits. Staff A stated that they would look for the missing documents to send to the Regulator.

In a phone interview, on 12/13/2024 at 4:33 PM, Staff A stated that they would terminate Staff C on this day.

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, Hope Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 12/13/2024.

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

AMA

Provider (or Representative)

1/18/25

Date