



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Bright Hope Adult Family Home LLC
Bright Hope Adult Family Home LLC
18904 131st PI SE
Renton, WA 98058

RE: Bright Hope Adult Family Home LLC License # 754679

Dear Provider:

This letter addresses Compliance Determination(s) 56155 (Completion Date 03/11/2025) and 51849 (Completion Date 12/26/2024).

The Department completed a follow-up inspection of your Adult Family Home on 03/11/2025 and found that you have corrected the violations listed in the Full report dated 12/26/2024. Your home is back in compliance as of 12/27/2024 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 388-76-10485-1

The Department staff who did the on-site verification:
Karen Beardsley, NCI

If you have any questions, please contact me at (253)234-6033.

Sincerely,

Cecile Leano, Field Manager
Region 2, Unit E
Residential Care Services



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Statement of Deficiencies	License #: 754679	Compliance Determination # 51849
Plan of Correction	Bright Hope Adult Family Home LLC	Completion Date
Page 1 of 3	Licensee: Bright Hope Adult Family Home LLC	12/26/2024

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 12/16/2024 and 12/16/2024 of:

Bright Hope Adult Family Home LLC
18904 131st PI SE
Renton, WA 98058

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:

Karen Beardsley, NCI

From:

DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit E
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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.

Residential Care Services

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)

Date

WAC 388-76-10485 Medication storage. The adult family home must ensure all prescribed and over-the-counter medications are stored:

(1) In locked storage;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure over-the-counter medications for 1 of 4 residents (Resident 1) were in locked storage. This failure placed Resident 1 at risk of losing their medications and placed ambulatory residents at risk of ingesting medications that were not theirs.

Findings included...

On 12/16/2024 at 10:16 AM, during an interview Staff A, Provider, stated that Residents 1, 2 and 4 were ambulatory with use of walkers and that Resident 3 was wheelchair dependent. They stated that all the residents required assistance with medications.

On 12/16/2024 at 10:52 AM, observation of Resident 1's bedroom showed on the second unlocked drawer on left side of the dresser contained an open 2.7 ounce tube of Lidocaine pain relief cream, an open 1.76 ounce container of Medicated chest rub, one open 2.5 milliliter bottle of Pataday eye drops (an eye drop for treatment of allergies), containing 30 day supply one open bottle of Roloids Power gummies (for Heartburn treatment) with 24 of 54 gummies remaining, one open bottle of Women's multi zero sugar (a daily multivitamin for women with no sugar added) with 13 out of 150 gummies remaining and one open bottle of women's one a day (a daily multivitamin for women) with 86 out of 170 gummies remaining.

On 12/16/2024 at 10:56 AM, during an interview with Resident 1, they initially stated that they would not allow medications to be removed from the room, that they bought the medications and that they didn't want to ask for the Resident 1 stated that they often forgot to ask for Tramadol (pain medication) when they were in pain and that they used the medicated chest rub and the eye drops daily. Resident 1 verified that they had never been denied medication when they asked for it.

On 12/16/2024 at 11:01 AM, during an interview, Staff A stated that they had spoken to Resident 1 before about not keeping medications in their room, but it had not helped. Staff A stated that staff would be changing their medication routine so that when passing medications, they would ask Resident 1 directly if they needed them.

On 12/16/2024 at 11:34 AM, observation showed Residents 1, 2, and 4 standing from living room couch and using walkers to move to the dining room and seat themselves for lunch.

Record review of Resident 1's 05/19/2024 Negotiated Care Plan showed they required assistance with medications.

Record review of Resident 1's 04/17/2024 Assessment showed their assessed limitations included forgetting to take medications and inability to read labels, caregiver instructions include documenting medication taken by the resident and placing medications in a lockbox.

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, Bright Hope Adult 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