



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

12/17/2025

Peace & Comfort AFH LLC
Peace & Comfort AFH LLC
19037 104th Ave NE
Bothell, WA 98011

RE: Peace & Comfort AFH LLC # 754754

Dear Provider:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 70280 (Completion Date 12/17/2025) and 67326 (Completion Date 10/23/2025).

The Department completed a follow-up inspection of your Adult Family Home on 12/17/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

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:

(4) Criminal history disclosure and background check results as required.

WAC 388-76-10285 Tuberculosis Two step skin testing. Unless the person meets the requirement for having no skin testing or only one test, the adult family home, choosing to do skin testing, must ensure that each person has the following two-step skin testing:

(1) An initial skin test within three days of employment; and

(2) A second test done one to three weeks after the first test.

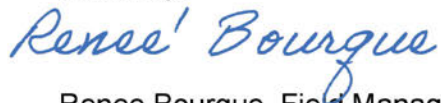
The Department staff who did the On Site verification:

Tekeste Demissie, Complaint Investigator
Renee Bourque, Field Manager

This document was prepared by Residential Care Services for the Locator website.

If you have any questions, please contact me at (206)914-5042.

Sincerely,

A handwritten signature in blue ink that reads "Renee Bourque". The signature is written in a cursive style with a large, stylized "B" at the end.

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

Statement of Deficiencies	License #: 754754	Compliance Determination # 67326
Plan of Correction	Peace & Comfort AFH LLC	Completion Date
Page 1 of 4	Licensee: Peace & Comfort AFH LLC	10/23/2025

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 an unannounced on-site complaint investigation on 10/16/2025 of:

Peace & Comfort AFH LLC
19037 104th Ave NE
Bothell, WA 98011

This document references the following complaint number(s): 197612

The following sample was selected for review during the unannounced on-site visit: 4 of 4 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Tekeste Demissie, Complaint Investigator

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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Statement of Deficiencies	License #: 754754	Compliance Determination # 67328
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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 deficiency in the enclosed report.

Renee Bourque
Residential Care Services

11/03/2025
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.

Hirut Dessene RN
Provider (or Representative)

11/11/25
Date

WAC 388-76-10198 Adult family home Personnel records. An 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:

(4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home failed to have a copy of the Washington state name and date of birth Background Check (BGC) and National Fingerprint (FP) BGC results for 1 of 6 staff (Staff E, Private Duty Nurse) readily available for review. This failure placed 4 of 4 residents (Residents 1, 2, 3, and 4) at risk of having a staff member with an unknown criminal background.

Findings included...

Review of Staff E's orientation and training records, on 10/16/2025, showed Staff E, Private Duty Nurse (PDN), was hired by the AFH on 09/03/2025.

Review of AFH personnel records, on 10/16/2025 at 11:35 PM, showed there was no copy of BGC or FP results for Staff E on file for review.

In an interview, on 10/16/2025 at 11:45 PM, Staff A, Entity Representative, stated that they were unaware Staff E did not have background check results. Staff A was not able to locate the background check results.

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

11/03/2025
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)

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:

(4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have a copy of the Washington state name and date of birth Background Check (BGC) and National Fingerprint (FP) BGC results for 1 of 6 staff (Staff E, Private Duty Nurse) readily available for review. This failure placed 4 of 4 residents (Residents 1, 2, 3, and 4) at risk of having a staff member with an unknown criminal background.

Findings included...

Review of Staff E's orientation and training records, on 10/16/2025, showed Staff E, Private Duty Nurse (PDN), was hired by the AFH on 09/03/2025.

Review of AFH personnel records, on 10/16/2025 at 11:35 PM, showed there was no copy of BGC or FP results for Staff E on file for review.

In an interview, on 10/16/2025 at 11:45 PM, Staff A, Entity Representative, stated that they were unaware Staff E did not have background check results. Staff A had not been able to locate the background check results.

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In a follow-up phone interview, on 10/27/2025 at 9:45 AM, Staff E stated that they had the FP check result for Staff E and ready for the regulator to review.

In an interview, on 10/27/2025 at 3:35 PM, Staff E stated that they had completed the background checks.

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, Peace & Comfort AFH LLC is or will be in compliance with this law and / or regulation on (Date) 11/30/25.

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

Provider (or Representative)

Hina Sessing

Date

11/11/25

WAC 388-76-10285 Tuberculosis Two step skin testing. Unless the person meets the requirement for having no skin testing or only one test, the adult family home, choosing to do skin testing, must ensure that each person has the following two-step skin testing:

- (1) An initial skin test within three days of employment; and
- (2) A second test done one to three weeks after the first test.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to have a system in place to ensure 5 of 6 staff (Staff B, C, D, F, Caregiver and Staff E, Private Duty Nurse, PDN) had the tuberculosis (TB) testing within three days of employment. This failure placed 4 of 4 residents (Residents 1, 2, 3, and 4) at risk of being exposed to communicable disease.

Findings included...

Review of Staff B's, Caregiver, record showed the AFH hired Staff B on 03/14/2024. Record reviews showed Staff B had a history of TB skin testing with negative results on 03/02/2024 and 03/22/2024. There was no evidence Staff F obtained a TB test within three days of hire at the AFH.

In a follow-up phone interview, on 10/27/2025 at 9:45 AM, Staff A stated that they had the FP check result for Staff E and ready for the regulator to review.

In an interview, on 10/27/2025 at 3:35 PM, Staff E stated that they had completed the background checks.

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, Peace & Comfort AFH 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 388-76-10285 Tuberculosis Two step skin testing. Unless the person meets the requirement for having no skin testing or only one test, the adult family home, choosing to do skin testing, must ensure that each person has the following two-step skin testing:

- (1) An initial skin test within three days of employment; and
- (2) A second test done one to three weeks after the first test.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to have a system in place to ensure 5 of 6 staff (Staff B, C, D, F, Caregivers, and Staff E, Private Duty Nurse, PDN) had the tuberculosis (TB) testing within three days of employment. This failure placed 4 of 4 residents (Residents 1, 2, 3, and 4) at risk of being exposed to a communicable disease.

Findings included...

Review of Staff B's, Caregiver, record showed the AFH hired Staff B on 03/14/2024. Record reviews showed Staff B had a history of TB skin testing with negative results on 03/02/2024 and 03/22/2024. There was no evidence Staff F obtained a TB test within three days of hire at the t AFH.

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Review of Staff C's, Caregiver, record showed the AFH hired Staff C on 10/14/2025. Record reviews showed Staff B had a history of X-ray TB testing with negative results on 12/02/2024. There was no evidence Staff C obtained a TB test within three days of hire at the AFH.

Review of Staff D's, Caregiver, record showed the AFH hired Staff D on 09/03/2025. Record reviews showed Staff B had a history of TB testing with negative results on 03/11/2024 and 03/18/2024. There was no evidence Staff D obtained a TB test within three days of hire at the AFH.

Review of Staff E's record showed the AFH hired Staff E on 09/03/2025. Record reviews showed Staff E had a history of TB skin test with positive results on 12/11/2006, chest X-ray with negative result on 06/22/2007, and annual TB symptom assessment on 06/26/2024 with no TB symptoms. There was no evidence Staff E had a TB test within three days of hire at the AFH.

Review of Staff F's, Caregiver, record showed the AFH hired Staff F on 10/22/2020. Record reviews showed Staff F had a history of TB skin test with positive results of unknown date, and chest X-ray with negative result on 12/14/2012. There was no evidence Staff F obtained a TB testing within three days of hire at the AFH.

In an interview, on 10/16/2025 at 11:45 PM, Staff A, Entity Representative, stated that they would look for missing records and provided them to the Department.

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, Peace & Comfort AFH LLC is or will be in compliance with this law and / or regulation on (Date) 11/30/25.

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

Provider (or Representative) Hirut Dessie RN

Date 11/11/25

Review of Staff C's, Caregiver, record showed the AFH hired Staff C on 10/14/2025. Record reviews showed Staff B had a history of X-ray TB testing with negative results on 12/02/2024. There was no evidence Staff C obtained a TB test within three days of hire at the AFH.

Review of Staff D's, Caregiver, record showed the AFH hired Staff D on 09/03/2025. Record reviews showed Staff B had a history of TB testing with negative results on 03/11/2024 and 03/18/2024. There was no evidence Staff D obtained a TB test within three days of hire at the AFH.

Review of Staff E's record showed the AFH hired Staff E on 09/03/2025. Record reviews showed Staff E had a history of TB skin test with positive results on 12/11/2006, chest X-ray with negative result on 06/22/2007, and annual TB symptom assessment on 02/16/2024 with no TB symptoms. There was no evidence Staff E had a TB test within three days of hire at the AFH.

Review of Staff F's, Caregiver, record showed the AFH hired Staff F on 10/22/2020. Record reviews showed Staff F had a history of TB skin test with positive result on unknown date, and chest X-ray with negative result on 12/14/2012. There was no evidence Staff F obtained a TB testing within three days of hire at the AFH.

In an interview, on 10/16/2025 at 11:45 PM, Staff A, Entity Representative, stated that they would look for missing records and provided them to the Department.

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, Peace & Comfort AFH 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