STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

Zagol Seniors Care LLC
Zagol Seniors Care LLC
3421 176th Pl SE
Bothell, WA 98012

RE: Zagol Seniors Care LLC # 755310

Dear Provider:

This document references Compliance Determination 36678 (03/05/2024), which included complaint number(s) 117022, 115321.

The Department completed a complaint investigation of your Adult Family Home on 03/05/2024 and found that your home does not meet the Adult Family Home Licensing requirements.

The department staff who did the inspection and provided consultation:

Megan Wylie, Licensor

A licensor may consult with a provider when a violation of the Washington Administrative Code (WAC) or Revised Code of Washington (RCW) is found, but it is not cited in the Statement of Deficiencies. Violations may not be cited when it is a first-time violation of statute or rule with minimal or no harm to residents. A consult does not require a follow-up visit.

Consultation:

WAC 388-76-10715 Doors Ability to open. The adult family home must ensure:

(3) At least one door leading to the outside is designated as an emergency exit. In homes licensed after January 1, 2016, this door must have a lever door handle on both sides and hardware that allows residents to exit when the door is locked and immediately reenter without a key, tool, or special knowledge or effort by residents;

The Adult Family Home front door did not have a mechanism to prevent the door from automatically locking after exiting. The Provider stated they would replace the door locking mechanism as soon as possible to ensure no residents were inadvertently locked out.

You Must:
- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:
- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:
- Inspect the home to determine if you have corrected all deficiencies.

You May:
- Ask for a informal dispute resolution meeting, according to the attached 'Informal Dispute Resolution' instructions; and
- Ask questions and provide written information to help clarify or dispute the deficiencies.
- Contact me for clarification of the deficiency or deficiencies found.

If You Have Any Questions:
- Please contact me at (206)348-9350.

Sincerely,

Nicholette Flynn, Field Manager
Region 2, Unit B
Residential Care Services

INFORMAL DISPUTE RESOLUTION [RCW 70.128]

You May:
Request an Informal Dispute Resolution (IDR) meeting within 10 working days after the date you receive this letter. You **must** use an **'IDR Request Form'** for **each** citation or enforcement you plan to dispute. You can find this form and directions on the IDR Adult Family Home web page at: https://www.dshs.wa.gov/altsa/idr

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Provider Process for Choosing a Panel or Traditional IDR:

You may only choose a **Panel IDR** if you are disputing **three or fewer** citations or enforcement actions. You may choose a **Traditional IDR** regardless of the number of citations or enforcement actions you intend to dispute. If you choose a **Panel IDR**, all documents supporting your dispute must be submitted within **20 working days** after the date you receive this letter. For **Panel IDR**s the program will not consider any documents submitted after the **20 working day deadline**. For **Traditional IDRs** you should submit documents supporting your dispute at least **seven** days prior to the date of the IDR meeting.

Send your request and supporting documents to the address below or email to rcsidr@dshs.wa.gov:

Adult Family Home IDR Program
Residential Care Services
PO Box 45600
Olympia, WA 98504-5600

Residential Care Services
Investigation Summary Report

Provider/Facility: Zagol Seniors Care LLC
Provider Type: Adult Family Home
License/Cert.#: 755310
Compliance Determination #: 36678
Intake ID: 117022
Investigator: Megan Wylie
Region/Unit #: RCS Region 2 / Unit B
Investigation Date(s): 02/12/2024 through 03/05/2024
Complainant Contact Date(s):

Allegation(s):

1. The Adult Family Home (AFH) locked a resident out of the home.
2. The AFH implemented a curfew for residents.

Investigation Methods:

Sample:	Total residents: 6 Resident sample size: 2 Closed records sample size: 0
Observations:	Identified resident Residents Activities Dining Resident care equipment Resident rooms Staff to resident interactions Resident to resident interactions
Interviews:	Identified resident Nursing staff Residents Family members Social services staff
Record Reviews:	Medical records State reporting log Facility policies

Investigation Summary:

1. The front door thumbprint did not work when the resident returned to the facility from an appointment away from the home. The AFH provider had not been aware of the resident coming into the home through the window and stated that the resident was let in by a staff member of the home. The resident's thumbprint had been added again to the front door lock to prevent future issues. Due to the door being an unapproved style that does not allow immediate reentry, the facility would need to replace the door locking system.
2. The AFH was aware that they cannot put curfews on a resident and must allow them

to return to the home. The AFH did encourage residents to return to the home by 8pm but it was not a requirement. The identified resident had their thumbprint approved for accessing the front door lock to prevent any issues in the future. The AFH did not have awake staff at the time of the incident. The Identified resident reported that there was always two staff on duty.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A