



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

Woodhaven Adult Family Home, LLC
Woodhaven Adult Family Home, LLC
20502 15TH AVE W
LYNNWOOD, WA 98036

RE: Woodhaven Adult Family Home, LLC License # 755361

Dear Provider:

This letter addresses Compliance Determination(s) 39162 (Completion Date 04/02/2024) and 37354 (Completion Date 02/27/2024).

The Department completed a follow-up inspection of your Adult Family Home on 04/02/2024 and found that you have corrected the violations listed in the Complaint report dated 02/27/2024. Your home is back in compliance as of 03/01/2024 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 388-76-10340, WAC 388-76-10340-1, WAC 388-76-10340-2, WAC 388-76-10340-3,
WAC 388-76-10340-4, WAC 388-76-10340-5

The Department staff who did the on-site verification:
Tekeste Demissie, Complaint Investigator

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

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



Residential Care Services Investigation Summary Report

Provider/Facility: Woodhaven Adult Family Home, LLC

License/Cert.#: 755361

Compliance Determination #: 37354

Investigator: Tekeste Demissie

Investigation Date(s): 02/26/2024 through 02/27/2024

Complainant Contact Date(s):

Provider Type: Adult Family Home

Intake ID: 116558

Region/Unit #: RCS Region 2 / Unit I

Allegation(s):

1. The Named Resident (NR) had an unwitnessed fall in the Adult Family Home (AFH) resulted in laceration.

Investigation Methods:

Sample:	Total residents: 6 Resident sample size: 3 Closed records sample size:
Observations:	Adult Family Home Environment Resident Appearance Resident to Staff Interaction Direct Resident Care.
Interviews:	Residents Staff/Provider Resident Representatives
Record Reviews:	Resident Records Incident Logs AFH Policies and Procedures Third Party Provider Notes

Investigation Summary:

1. Observations showed the NR was in common area sitting, watching TV, and walker at NR's reach. Observation showed the NR's walker had a sign to call for assist and call bell was hanging on the walker. Observation showed the AFH had functioning call bell system. In an interview, the NR stated they fell when they attempted to get up and staff came and assisted them. In an interview, sample residents stated they had no issue with the care provided to them and the AFH staff responded to their call appropriately. In an interview, Resident 2's and 5's Representatives stated they have no concern about how residents had been treated. In an interview, Staff A (Provider) reported they had called 911 for evaluation and treatment and contacted all appropriate parties including the hot line. Record review showed the AFH kept incident log and contacted all appropriate parties. The AFH got timely medical attention for the named resident. The AFH had abuse and neglect policy in place and the State hotline posted in visible.

The AFH failed to have a system in place to ensure a Preliminary Service Plan (PSP) was in place for four residents. see SOD dated 02/29/2024.

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A



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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 #: 755361	Compliance Determination # 37354
Plan of Correction	Woodhaven Adult Family Home, LLC	Completion Date
Page 1 of 3	Licensee: Woodhaven Adult Family Home, LLC	02/27/2024

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 an unannounced on-site complaint investigation on 02/26/2024 and 02/26/2024 of:

Woodhaven Adult Family Home, LLC
20502 15TH AVE W
LYNNWOOD, WA 98036

This document references the following complaint number(s): 116558

The following sample was selected for review during the unannounced on-site visit: 3 of 6 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

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.

RECEIVED

MAR 04 2024

DSHS/ALTS/RCS

Statement of Deficiencies

License #: 755351

Compliance Determination #37354

Plan of Correction

Woodhaven Adult Family Home, LLC

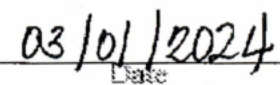
Completion Date

Page 2 of 3

Licensee: Woodhaven Adult Family Home, LLC

02/27/2024


 Provider (or Representative)


 Date

WAC 388-76-10340 Preliminary service plan. The adult family home must ensure that each resident has a preliminary service plan that includes:

- (1) The resident's specific problems and needs identified in the assessment;
- (2) The needs for which the resident chooses not to accept or refuses care or services;
- (3) What the home will do to ensure the resident's health and safety related to the refusal of any care or service;
- (4) Resident defined goals and preferences; and
- (5) How the home will meet the resident's needs.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have a system in place to ensure a Preliminary Service Plan (PSP) was in place for 4 of 6 residents (Resident 1, 2, 5, and 6). This failure placed Resident 1, 2, 5, and 6 at risk of having unrecognized care needs.

Findings included...

<Resident 1>

Review of Resident 1's record showed the AFH admitted Resident 1 on [REDACTED] 2023 with several diagnoses including [REDACTED] and [REDACTED]. Resident 1's record did not have a PSP.

<Resident 2>

Review of Resident 2's record showed the AFH admitted Resident 2 on [REDACTED] 2022 with several diagnoses including [REDACTED] and [REDACTED]. Resident 2's record did not have a PSP.

<Resident 5>

Review of Resident 5's record showed the AFH admitted Resident 5 on [REDACTED] 2022 with several diagnoses including [REDACTED] and [REDACTED]. Resident 5's record did not have a PSP.

<Resident 6>

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Statement of Deficiencies	License #: 755361	Compliance Determination #37354
Plan of Correction	Woodhaven Adult Family Home, LLC	Completion Date
Page 3 of 3	Licenses: Woodhaven Adult Family Home, LLC	02/27/2024

Review of Resident 6's record showed the AFH admitted Resident 6 on [REDACTED] 2022 with several diagnoses including history of [REDACTED], and [REDACTED]. Resident 6's record did not have a PSP.

During an interview, on 02/26/2024 at 9:55 AM, Staff A, Provider, stated that the PSP for Residents 1, 2, 5, and 6 were not completed. Staff A stated that they would ensure the PSP for all residents were up to date.

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, Woodhaven Adult Family Home, LLC is or will be in compliance with this law and / or regulation on

(Date) March 1, 2024

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

J. C. Ali
Provider (or Representative)

03/01/24
Date

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

Renee' Bourque
Resident Care Services
Region 2, Unit 1
203011 52nd Ave. W Suite 100
Lynnwood, WA 98036

From: Woodhaven Adult Family Home, LLC
License # 755361

RE: On-Site Complaint Investigation on February 26,2024
Adult Family Home Complaint Investigator: Tekeste Demissie, RN

PLAN OF CORRECTION:

WAC 388-76-10340 (Preliminary Service Plan)

The provider will make sure to review the Assessment Details before admitting a resident. After admitting a resident, the home must ensure that each resident has a preliminary service plan before the actual 30 days negotiated care plan. Provider will make sure it is well explained to the resident/resident representative before signing the plan.

See the attached template to be filled out on the day of admission to be signed by the resident, resident representative, guardian or POA (Power of Attorney) and AFH representative.

Corrective action complete (March 1, 2024)

Sincerely,

Analyn Catli
Woodhaven Adult Family Home, LLC
Provider/Owner
505-285-8651

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