



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Cascade Ridge Adult Family Home LLC
Cascade Ridge Adult Family Home LLC
14216 29th Ave S
Seatac, WA 98168

RE: Cascade Ridge Adult Family Home LLC License # 755555

Dear Provider:

This letter addresses Compliance Determination(s) 75210 (Completion Date 04/22/2026) and 72903 (Completion Date 03/02/2026).

The Department completed a follow-up inspection of your Adult Family Home on 04/22/2026 and found that you have corrected the violations listed in the Full report dated 03/02/2026. Your home is back in compliance as of 03/20/2026 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 388-76-10360, WAC 388-76-10380-4, WAC 388-76-10135-4, WAC 388-112A-0400-1

The Department staff who did the on-site verification:

Marites Gatan, NCI

If you have any questions, please contact me at (253)234-6007.

Sincerely,

Lydia Owusu-Acheampong, Community Field Manager
Region 2, Unit G
Residential Care Services



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Statement of Deficiencies	License #: 755555	Compliance Determination # 72903
Plan of Correction	Cascade Ridge Adult Family Home LLC	Completion Date
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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 02/19/2026 of:

Cascade Ridge Adult Family Home LLC
14216 29th Ave S
Seatac, WA 98168

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:

Marites Gatan, NCI

From:
DSHS, Home and Community Living Administration
Residential Care Services, Region 2 , Unit G
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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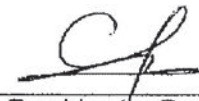
As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.


Residential Care Services

3-3-2026

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)

03/04/2026

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 observation, interview, and record review, the Adult Family Home (AFH) failed to ensure that 1 of 2 sampled staff (Staff B, Caregiver) had completed Tuberculosis [TB] a communicable disease affecting lungs] within three days of employment. This failure placed all four residents at the AFH at risk of exposure to TB.

Findings included...

Observation on 02/19/2026 at 9:33 AM showed Staff A, Entity Representative/Resident Manager providing care and services to three residents (Residents 1, 2, and 3). One resident (Resident 4) was out of the home.

In an interview on 02/19/2026 at 10:36 AM, Staff A stated that Staff B worked part time.

Observation on 02/19/2026 at 10:44 M showed Staff B arrived at the AFH.

Observation on 02/19/2026 at 12:07 PM showed Staff B prepared lunch for the residents.

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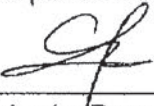
Observation on 02/19/2026 at 12:13 PM showed Staff B served lunch to Resident 1 and Resident 2.

Record review of Staff B's personnel file showed the AFH hired them on 12/22/2025. Staff B had a TB skin test administered on 06/01/2024 that was read on 06/03/2024 with 0.1 millimeter induration and negative result. Staff B had a TB symptom screening completed on 01/19/2026 with no symptom exhibited. Staff B had no TB test done within three days of employment.

In an interview on 02/19/2026 at 4:46 PM, Staff B stated that they did not have any TB test when the AFH hired them.

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, Cascade Ridge Adult Family Home LLC is or will be in compliance with this law and / or regulation on
(Date) 02/22/2026

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



Provider (or Representative)

03/04/2026

Date

WAC 388-76-10360 Negotiated care plan Timing of development Required. The adult family home must ensure the negotiated care plan is developed and completed within thirty days of the resident's admission.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) provider failed to ensure Negotiated Care Plan (NCP) was developed and completed within thirty days of admission for 1 of 2 sampled residents (Resident 2). This failure placed Resident 2 at risk of unmet care needs.

Findings included...

Observation on 02/19/2026 at 9:33 AM showed Staff A, Entity Representative/Resident Manager provided care and services to three residents (Residents 1, 2, and 3). One resident (Resident 4) was out of the home.

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Record review of Resident 2's AFH file showed the AFH admitted Resident 2 on [REDACTED] 2023. Resident 2 had a [REDACTED]/2023 NCP that was signed by the Provider on 10/25/2023 and by Resident 2's representative on 11/05/2023. Resident 2's NCP was developed 77 days after Resident 2's admission.

In an interview on 02/19/2026 at 5:10 PM, Staff A stated that they waited for the assessment before they developed Resident 2's NCP. Department staff pointed out to Staff A that Resident 2 had a 02/24/2023 annual assessment and a 09/11/2023 significant change of condition assessment. Staff A had no response to these information presented to them.

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, Cascade Ridge Adult Family Home LLC is or will be in compliance with this law and / or regulation on
(Date) 03/20/2026

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


Provider (or Representative)

03/04/2026
Date

WAC 388-76-10380 Negotiated care plan Timing of reviews and revisions. The adult family home must ensure that each resident's negotiated care plan is reviewed and revised as follows:

(4) At least every twelve months.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to review the Negotiated Care Plan (NCP) for 1 of 2 sampled residents (Resident 2) at least every twelve months. This failure placed Resident 2 at risk of unmet care needs.

Findings included...

Observation on 02/19/2026 at 9:33 AM showed Staff A, Entity Representative/Resident Manager provided care and services to three residents (Residents 1, 2, and 3). One resident (Resident 4) was out of the home.

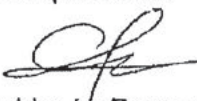
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Record review of Resident 2's AFH file showed the AFH admitted Resident 2 on [REDACTED]/2023. Resident 2 had a 10/26/2023 NCP that was signed by the Provider on 10/25/2023 and by Resident 2's representative on 11/05/2023. The same 10/26/2023 NCP was signed and dated by Provider and Resident 2's representative on 10/30/2024. The 10/26/2023 NCP had no signature for year 2025 to indicate that the NCP was reviewed.

In an interview on 02/19/2026 at 4:58 PM, Staff A stated that they reviewed the NCP with Resident 2's representative, however, did not ask for signature. Staff A stated that they thought that they were only required to ask to sign the NCP every two years.

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, Cascade Ridge Adult Family Home LLC is or will be in compliance with this law and / or regulation on
(Date) 02/20/2026

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


Provider (or Representative)

03/04/2026
Date

WAC 388-112A-0400 What is specialty training and who is required to take it?

(1) Specialty training refers to approved curricula that meets the requirements of RCW 18.20.270 and 70.12B.230 to provide basic core knowledge and skills to effectively and safely provide care to residents living with mental illness, dementia, or developmental disabilities.

WAC 388-76-10135 Qualifications Caregiver. The adult family home must ensure each caregiver has the following minimum qualifications:

(4) Has completed the training requirements in effect on the date the caregiver was hired, including the requirements applicable to the caregiver under chapter 388-112A WAC;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure that 1 of 3 caregivers (Staff B, Caregiver) completed their Developmental Disabilities administration (DDA) training as required. This placed Resident 3 at risk of harm and compromised care due to an unqualified caregiver.

Findings included...

Observation on 02/19/2026 at 9:33 AM showed Staff A, Entity Representative/Resident Manager provided care and services to three residents (Residents 1, 2, and 3). One resident (Resident 4) was out of the home.

In an interview on 02/19/2026 at 10:36 AM, Staff A stated that Staff B worked part time.

Observation on 02/19/2026 at 10:44 M showed Staff B arrived at the AFH.

Record review of Staff B's personnel file showed the AFH hired them on 12/22/2025, and Staff B had no DDA training.

Record review of Resident 3's 07/07/2025 annual DDA assessment showed that AFH admitted Resident 3 in [REDACTED] 2024.

In an interview on 02/19/2026 at 4:07 PM, Staff A confirmed that Staff B had no DDA training and that Resident 3 was a DDA resident. Staff A stated that they thought it was ok for Staff B to work without the training if the provider [Staff A], had completed DDA training as required.

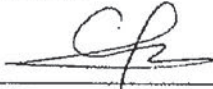
In an interview on 02/25/2026 at 1:40 PM, Staff B stated that they worked from 7:00 AM to 7:00 PM. Staff B stated that sometimes worked alone.

In an interview on 03/02/2026 at 3:57 PM, Staff A stated that when they went grocery shopping, Staff B would be left alone at the AFH to care for the residents.

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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, Cascade Ridge Adult Family Home LLC is or will be in compliance with this law and / or regulation on
(Date) 03/2/20 - 03/04/20

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



Provider (or Representative)

03/04/2026

Date

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