



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

FamilyChoice Adult Homes, LLC
FamilyChoice Adult Homes, LLC
1516 10th Ct NW
Auburn, WA 98001

RE: FamilyChoice Adult Homes, LLC License # 756339

Dear Provider:

This letter addresses Compliance Determination(s) 58923 (Completion Date 05/01/2025) and 57594 (Completion Date 04/11/2025).

The Department completed a follow-up inspection of your Adult Family Home on 05/01/2025 and found that you have corrected the violations listed in the Complaint report dated 04/11/2025. Your home is back in compliance as of 04/08/2025 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 388-76-10015-3, WAC 388-76-10015

The Department staff who did the on-site verification:
Vadim Panitkov, NCI

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

Sincerely,

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



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Statement of Deficiencies	License #: 756339	Compliance Determination # 57594
Plan of Correction	FamilyChoice Adult Homes, LLC	Completion Date
Page 1 of 4	Licensee: FamilyChoice Adult Homes, LLC	04/11/2025

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 04/07/2025 of:

FamilyChoice Adult Homes, LLC
1516 10th Ct NW
Auburn, WA 98001

This document references the following complaint number(s): 170820

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 investigated the Adult Family Home:

Vadim Panitkov, NCI

From:
DSHS, Aging and Long-Term Support 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

4-16-2025

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)

04/08/2025

Date

WAC 388-76-10015 License Adult family home Compliance required.

(3) The provider must promote the health, safety, and well-being of each resident residing in each licensed adult family home.

This requirement was not met as evidenced by:

Based on observation, interview, and record review the Adult Family Home (AFH) failed to implement a Respiratory Protection Program (RPP) for 2 of 2 employees (Staff A, Entity Representative/Resident Manager, and Staff B, Caregiver). This failure placed all AFH staff and residents at risk for contracting Coronavirus-19 [COVID-19 (a respiratory sickness caused by a virus)].

Findings included...

On 04/07/2025 at 10:14 AM, observation showed Residents 1, 2, and 3 with Staff B at the AFH. Resident 4 was out of the facility on an appointment with Staff A.

On 04/07/2025 10:37 AM, in an interview, Staff B stated that

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Resident 1 and 2 tested [REDACTED] for COVID-19 and that the AFH staff used Personal Protective Equipment including masks.

On 04/07/2025 11:15 AM, department staff requested to review Respirator Fit Test Record for Staff A and B. The Respirator Fit Test Record showed that the respirator fit test was completed on 01/14/2024 for Staff A and B. In a follow-up interview, Staff B was informed that the Respirator Fit Test Record was over a year old. Staff B stated that Staff A had additional records that will be sent over to department staff for review.

A review of staff records sent by Staff A on 04/08/2025 in an email showed a Filtering Facepiece Respirator Fit Test Record for Staff A and B dated 01/14/2024. Review of records showed that Staff A and B had their fit test completed on 01/14/2024. An additional email received from Staff A on 04/08/2025 showed that Staff A and B had a new test record that was completed on 04/08/2025, the day after department's staff unannounced visit.

On 04/09/2025 at 10:48 AM, in a telephone interview, department staff asked Staff A why Staff A's and B's fit test record was not renewed since 01/14/2024. Staff A stated that it was an oversight and that they had a fit test scheduled earlier but there was no availability, when they contacted Collateral Contact 1(CC1).

On 04/09/2025 at 11:11 AM, in a telephone interview, CC1 stated that Staff A reached out to them to schedule fit testing for staff at the AFH the previous week and only had availability on 04/08/2025. CC 1 stated that Staff A had not scheduled any testing or contacted them prior to the previous week.

Statement of Deficiencies

License #: 756339

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Plan of Correction

FamilyChoice Adult Homes, LLC

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Licensee: FamilyChoice Adult Homes, LLC

04/11/2025

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, FamilyChoice Adult Homes, LLC is or will be in compliance with this law and / or regulation on
(Date) 04/08/2025

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

Jihala Kha
Provider (or Representative)

04/08/2025
Date

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