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

1st Charleon Adult Family Home LLC
1ST CHARLEON ADULT FAMILY HOME LLC
103 52nd Dr NE
Marysville, WA 98270

RE: 1ST CHARLEON ADULT FAMILY HOME LLC License # 757424

Dear Provider:

This letter addresses Compliance Determination(s) 63868 (Completion Date 08/12/2025) and 54297 (Completion Date 03/26/2025).

The Department completed a follow-up inspection of your Adult Family Home on 08/12/2025 and found that you have corrected the violations listed in the Complaint report dated 03/26/2025. Your home is back in compliance as of 05/11/2025 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 388-76-10355-7-b

The Department staff who did the off-site verification:
Megan Wylie, Licensor

If you have any questions, please contact me at (206)348-9350.

Sincerely,

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

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

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3906-172nd St NE, Suite #100, Arlington, WA 98223

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 02/06/2025 and 02/25/2025 of:

1ST CHARLEON ADULT FAMILY HOME LLC
112 W Marion St
Arlington, WA 98223

This document references the following complaint number(s): 162241, 162240, 167096, 167835

The following sample was selected for review during the unannounced on-site visit: 4 of 5 current residents and 3 former residents.

The department staff that investigated the Adult Family Home:

Megan Wylie, Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit B
3906-172nd St NE, Suite #100
Arlington, WA 98223

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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.

Nicholette Flynn
Residential Care Services

3/27/2025
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 388-76-10355 Negotiated care plan. The adult family home must use the resident assessment and preliminary care plan to develop a written negotiated care plan. The home must ensure each resident's negotiated care plan includes:

(7) If needed, a plan to:

(b) Reduce tension, agitation and problem behaviors;

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure the Negotiated Care Plan (NCP) for 2 of 2 former residents (Former Resident 1 and Former Resident 2) included their behaviors and interventions. This failure may have contributed to unrecognized behavioral care needs for Former Resident 1 and Former Resident 2.

Findings included...

Former Resident 1:
Record review of Former Resident 1's NCP, dated 08/17/2024, showed Former Resident 1 was admitted to the home on [redacted]/2024 with multiple medical diagnoses. Former Resident 1's most recent assessment, dated 06/06/2024 showed the resident was combative with personal care, easily irritable/agitated requiring intervention, used offensive language and yelling/screaming.

Record review of Former Resident 1's NCP, dated 08/17/2024, did not show any caregiver instructions documented in the column, "labeled for what a caregiver should do when the resident has specific problem behaviors.

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Former Resident 2:
Record review of Former Resident 2's NCP, dated 01/30/2024, showed Former Resident 2 was admitted to the home on [redacted]/2024 with multiple diagnoses. Former Resident 2's most recent assessment, dated 11/07/2024 showed the resident had multiple behaviors to include delusions, disruptive at night, hallucinations, easily irritable/agitated requiring intervention, intimidating/threatening, and resistive to care.

Record review of Former Resident 2's NCP, dated 08/17/2024, listed some of the identified behaviors and did not show any caregiver instructions documented in the column, labeled for what a caregiver should do when the resident has specific problem behaviors.

During an interview, on 02/26/2025 at 12:15 PM, Staff A (Resident Manager and Entity Representative) stated that they did not realize the behaviors and interventions were not in the NCP.

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, 1ST CHARLEON ADULT FAMILY HOME 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

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