



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

Peace and Pleasant Care Adult Family Home, LLC
Peace and Pleasant Care Adult Family Home LLC
17223 37th LN S
Seatac, WA 98188-3064

RE: Peace and Pleasant Care Adult Family Home LLC License # 753552

Dear Provider:

This letter addresses Compliance Determination(s) 70688 (Completion Date 12/29/2025) and 67872 (Completion Date 11/05/2025).

The Department completed a follow-up inspection of your Adult Family Home on 12/29/2025 and found that you have corrected the violations listed in the Full report dated 11/05/2025. Your home is back in compliance as of 12/20/2025 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 388-76-10015-1, WAC 388-76-10430-1, WAC 388-76-10430-2-c, WAC 388-76-10430-2-d, 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, WAC 388-76-10490-2-a, WAC 388-76-10490-2-b-i

The Department staff who did the on-site verification:

Angelica Rios, ALF Licensor

If you have any questions, please contact me at (253)234-6033.

Sincerely,

Cecile Leano, Field Manager
Region 2, Unit G
Residential Care Services



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Statement of Deficiencies	License #: 753552	Compliance Determination # 67872
Plan of Correction	Peace and Pleasant Care Adult Family Home LLC	Completion Date
Page 1 of 7	Licensee: Peace and Pleasant Care Adult Family Home, LLC	11/05/2025

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 the unannounced on-site full inspection on 10/28/2025 of:

Peace and Pleasant Care Adult Family Home LLC
17223 37th LN S
Seatac, WA 98188-3064

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:

Angelica Rios, ALF Licensor

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

11-13-2025
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)	<u>11/24/2025</u> _____ Date

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

(1) The licensed adult family home must comply with all the requirements established in chapters 70.128 , 70.129, 74.34 RCW, this chapter and other applicable laws and regulations including chapter 74.39A RCW; and

This requirement was not met as evidenced by:

Based on observation, interview and record interview, the Adult Family Home (AFH) failed to have a 1 of 1 Medical Test Site Waiver (MTSW), a license required to perform certain medical tests in an AFH. This failure led to the AFH conducting tests on Resident 4 without an MTSW.

Findings included...

Observation on 10/28/2025 at 11:00 AM, showed Resident 4 lived in and received care from the AFH.


During an interview on 10/10/2025 at 11:30 AM, Staff A, Entity Representative, stated that Resident 4 was Diabetic (a chronic disease where the body doesn't properly regulate blood sugar levels) and dependent on insulin (a hormone that helps regulate blood sugar levels) injections. Staff A further stated that Resident 4 required regular blood sugar testing.

Review of Resident 4's October 2025 medication administration record, showed that Resident 4 required glucose testing twice daily.

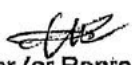
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During an interview on 10/28/2025 at 4:45 PM, Staff A stated that they were not aware a MTSW was required for glucose testing in the home. Staff A further stated that they would apply for MTSW.

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, Peace and Pleasant Care Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 12/19/2025 12/20/2025 

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

 Provider (or Representative)

11/24/2025 Date

WAC 388-76-10430 Medication system.

(1) If the adult family home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications.

(2) When providing medication assistance or medication administration for any resident, the home must ensure each resident:

(c) Medication log is kept current as required in WAC 388-76-10475 ;

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure medications were received as required for 1 of 2 sampled residents (Resident 1). Additionally, the AFH failed to keep the Medication Administration Record (MAR) current for 1 of 2 sampled residents (Resident 1). These failures placed Resident 1 at risk of worsening condition from missing prescribed medication and at risk of medication errors.

Findings included...

Observation on 10/28/2025 at 11:00 AM, showed Resident 1 lived in and received medication assistance from the AFH.

Review of Resident 1's October 2025 Electronic-MAR showed that Resident 1 was

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prescribed Cinacalcet 30 milligrams (mg), take 1 tablet by mouth every morning with breakfast for Hyperthyroidism (overactivity of the thyroid gland). Further review of Resident 1's Electronic-MAR showed an initialed entry for the 8:00 AM Cinacalcet dose between 10/01/2025 to 10/28/2025.

Observation on 10/28/2025 at 3:00 PM, showed Resident 1's medication storage container contained an unopened bubble pack of Cinacalcet with an expiration date of 09/15/2025. Further observation showed a scheduled medication bubble pack that did not contain Cinacalcet.

During an interview on 10/28/2025 at 3:30 PM, Staff A, Entity Representative, stated that Resident 1's Cinacalcet medication used to be included in Resident 1's scheduled medication bubble pack. Staff A further stated that Resident 1's Electronic-MAR showed initialed entries for the Cinacalcet because they thought it was included in the scheduled medications bubble pack. Staff A stated that they did not realize Resident 1 had not been receiving Cinacalcet and that they would contact Resident 1's physician to discuss the prescription medication.

Review of an email correspondence from Staff A on 10/29/2025 at 10:16 AM, showed a physician's order for Resident 1's Cinacalcet medication that was temporarily discontinued on 05/12/2025. Further review showed that Resident 1 was re-prescribed the medication on 09/19/2025. Additional review showed the Cinacalcet medication was reordered for Resident 1 on 10/28/2025.

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, Peace and Pleasant Care Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 12/29/2025 12/20/2025 *[Signature]*

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

[Signature] 11/24/2025
 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;

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(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 observation, interview and record review, the Adult Family Home (AFH) did not create a preliminary care plan that included the care needs for 1 of 2 sampled residents (Resident 3) when they were admitted to the home. This failure placed Resident 3 at risk of unmet care needs.

Findings included...

Observation on 10/28/2025 at 11:00 AM, showed Resident 3 lived in and received care from the AFH.

Review of Resident 3's records showed Resident 3 was admitted to the AFH on [REDACTED] 2025. Further review of Resident 3's records showed an assessment dated 09/08/2025. Review of Resident 3's assessment showed that Resident 3 had delusions (mental health condition in which a person can't tell what's real from what's imagined), hallucinations (a false perception of objects or events involving your senses) and thoughts of suicide. Additional review of Resident 3's assessment showed Resident 3 needed medications administered and needed assistance in the event of an evacuation. Further review of Resident 3's assessment showed Resident 3 was resistive to showers and that Resident 3 did not eat pork or shellfish.

Review of Resident 3's records showed an undated preliminary service plan. Further review showed the preliminary service plan did not include information on Resident 3's delusions, hallucinations and suicidal thoughts. Further review showed no information on care and interventions for Resident 3's mental health behaviors. Further review showed that Resident 3 had no refusal behaviors. Additional review showed no information regarding Resident 3's aversion to shellfish and pork. Further review of Resident 3's preliminary service plan showed no information on Resident 3's evacuation level and their need for medication administration.

During an interview on 10/28/2025 at 1:10 PM, Staff A, Entity Representative, stated that Resident 3 was recently admitted to the AFH and that they were working on their Negotiated Care Plan (NCP). Staff A further stated that they gave the preliminary service plan template to Resident 3's representative to fill out because Resident 3 was new to the home and they did not know Resident 3's preferences. Staff A stated that the preliminary service plan was completed by Resident 3's representative and not AFH staff. Additionally, Staff A stated that they would ensure all of Resident 3's care needs and preferences were addressed in their NCP.

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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, Peace and Pleasant Care Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 12/29/2025 . 12/20/2025

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

[Signature] _____ 11/24/2025
 Provider (or Representative) Date

WAC 388-76-10490 Medication disposal Written policy Required.

(2) The adult family home must develop and implement a written policy addressing the safe disposal of resident medications that have been discontinued, have expired, or were refused by the resident. The policy must:

- (a) Comply with all federal and state laws and regulations regarding medication disposal;
- (b) Address the safe disposal of medications for current residents, deceased residents, and residents who have discharged from the facility; and
- (l) For current residents the facility must safely dispose of discontinued medications, expired medications, and refused medications within 30 calendar days of discontinuation, expiration, or resident refusal;

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure expired medication was disposed of for 1 of 2 sampled residents (Resident 1). This failure placed Resident 1 at risk of receiving expired medication.

Findings included...

Observation on 10/28/2025 at 11:00 AM, showed Resident 3 lived in and received medication assistance from the AFH.

Review of Resident 1's October 2025 Electronic-MAR showed that Resident 1 was prescribed Cinacalcet 30 milligrams (mg), take 1 tablet by mouth every morning with breakfast for Hyperthyroidism (overactivity of the thyroid gland).

Observation on 10/28/2025 at 3:30 PM, showed Resident 1's medication storage container contained an unopened bubble pack of Cinacalcet 30 mg tablets with an

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expiration date of 09/15/2025. Further observation showed there were no other Cinacalcet tablets available in Resident 1's medication storage container.

Review of the AFH's medication disposal policy dated 10/05/2025, showed that expired medications were discarded with an RX Destroyer, a chemical drug destruction product.

During an interview on 10/28/2025 at 3:31 PM, Staff A, Entity Representative, stated that they did not realize there was expired medication in Resident 1's medication storage container. Staff A further stated that they would ensure a new medication pack was ordered from the pharmacy and the expired medication was discarded.

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, Peace and Pleasant Care Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 12/29/2025 . 12/20/2025 *AS*

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

AS
Provider (or Representative)

11/24/2025
Date

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