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

01/14/2025

Glorious Adult Family Home LLC
Glorious Adult Family Home LLC
3028 Stafford Way
Bothell, WA 98012

RE: Glorious Adult Family Home LLC # 756086

Dear Provider:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 53086 (Completion Date 01/14/2025) and 49149 (Completion Date 11/19/2024).

The Department completed a follow-up inspection of your Adult Family Home on 01/14/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-76-10195 Adult family home Staff Generally. The adult family home must ensure:

(1) When one or more residents are in the home, enough staff are available in the home to meet the needs of each resident, except as provided in WAC 388-76-10200 ;

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(1) Keep the home both internally and externally in good repair and condition with a safe, comfortable, sanitary, and homelike environment that is free of hazards;

The Department staff who did the On Site verification:
Nylay Quist, AFH 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

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

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 10/23/2024 and 10/23/2024 of:

Glorious Adult Family Home LLC
3028 Stafford Way
Bothell, WA 98012

This document references the following complaint number(s): 150634, 148900, 150818

The following sample was selected for review during the unannounced on-site visit: 3 of 5 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Nylay Quist, AFH 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.

Renee' Bourgue
Residential Care Services

11/20/2024
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.

Statement of Deficiencies	License #: 756086	Compliance Determination # 49149
Plan of Correction	Glorious Adult Family Home LLC	Completion Date
Page 2 of 5	Licensee: Glorious Adult Family Home LLC	11/19/2024

Provider (or Representative) 11/26/2024.
Date

WAC 388-76-10195 Adult family home Staff Generally. The adult family home must ensure:

(1) When one or more residents are in the home, enough staff are available in the home to meet the needs of each resident, except as provided in WAC 388-76-10200 ;

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure appropriate staffing was available to meet the needs of 1 of 5 residents (Resident 2). This failure placed Resident 2 at risk for injury and unmet care needs.

Finding included...

Review of Resident 2's record showed the AFH admitted Resident 2 on [redacted]/2023 with multiple diagnoses that includes [redacted] and [redacted].

Review of Resident 2's assessment, dated 04/15/2024, showed Resident 2 required assistance for evacuation. Resident 2 was total dependence for care and required two-persons assist for transfer, toileting, dressing, bathing and hygiene.

Review of Resident 2's Negotiated Care Plan, dated 04/20/2024, showed Resident 2 required assistance for evacuation. Resident 2 was total dependence and required two-persons assist for transfer.

Observation on 10/23/2024 at 11:18AM, showed Staff C (Caregiver) was the only AFH staff on duty. Observation showed Staff C called Staff A (Provider), and Staff B (Resident

Manager). Further observation showed Staff B arrived at the AFH at 12:40PM. Staff C was the only staff on duty for 1 hour and 22 minutes.

In an interview, on 10/23/2024 at 12:50PM, Staff B stated that Resident 2 was the only one that required two persons assist. Staff B stated that there were two caregivers on duty during the day and one caregiver on duty at night.

In an interview, on 10/23/2024 at 2:34PM, Staff C stated that they were a live-in caregiver, and that they were the only staff working when they worked their schedule shifts.

In an interview, on 10/23/2024 at 11:37AM, Resident 1, 3, and 5 stated that they mostly saw only one caregiver working in the AFH.

In an interview, on 10/28/2024 at 2:05PM, Staff A stated that Resident 2 was the only one that required two persons assist. Staff A stated that there were two caregivers on duty at the AFH twenty-four hours a day and seven days a week.

In an interview, on 10/28/2024 at 4:42PM, Collateral Contact 1 (CC1) stated they visited the AFH about three times a week. CC1 stated that they usually saw one caregiver on duty. CC1 stated that they saw two caregivers at the AFH during shift change only.

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, Glorious Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 10/24/2024.

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

Provider (or Representative) 11/26/2024. Date

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(1) Keep the home both internally and externally in good repair and condition with a safe, comfortable, sanitary, and homelike environment that is free of hazards;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure the patio deck board and ramp to the AFH entry door was in good repair. This failure placed 5 of 5 residents (Resident 1, 2, 3, 4, and 5) at risk for falls and injury.

Finding included...

Observation, on 10/23/2024 at 11:24AM, showed five residents (Resident 1, 2, 3, 4, and 5) resided in the AFH. Each resident had ambulatory needs that included a walker, a wheelchair, and other assistive devices.

Observation, on 10/23/2024 at 11:17AM, showed the traction layer on the ramp at the front entry door of the AFH had multiple cracks, and a peeled area that was raised and uneven with the ramp board.

Observation, on 11/23/2024 at 11:31AM showed the patio in the back yard had six damaged boards with exposed nails. Staff C, Caregiver, and Department Regulator had stepped over the damaged wood board areas to avoid a trip hazard when observing the deck.

In an interview, on 10/23/2024 at 11:37AM, Resident 3 stated that they had to avoid the peeled area on the ramp in front of the entry door, and the damaged wood boards on the patio in the backyard when they took their walker outside of the home. Resident 3 stated that they avoided tripping and falling by avoiding those damaged areas.

In an interview, on 10/23/2024 at 12:18PM, Resident 1 stated that they had tripped on the ramp at the AFH entry door two to three times because it was damaged and peeled.

Statement of Deficiencies	License #: 756086	Compliance Determination # 49149
Plan of Correction	Glorious Adult Family Home LLC	Completion Date
Page 5 of 5	Licensee: Glorious Adult Family Home LLC	11/19/2024

Resident 1 stated that they had tripped on the damaged wood boards on the patio in the backyard two to three times because it was damaged.

In an interview, on 11/04/2024 at 1:54PM, Resident 5 stated that they saw the peeled area on the ramp in front of the entry door and damaged wood boards on the patio in the backyard. Resident 5 stated that they would avoid those damaged areas because they don't want to trip on them.

In an interview, on 10/23/2024 at 12:50AM, Staff B, Resident Manager, stated that they were aware of the peeled area on the ramp in front of the entry door and damaged wood boards on the patio in the backyard. Staff B stated that they had communicated with the landlord since 10/03/2024. Staff B stated that the landlord informed them (Staff B) that they would come fix the peeled area on the ramp in front of the entry door and damaged wood boards on the patio in the backyard.

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, Glorious Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 10/25/2024

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

Provider (or Representative) — Date: 11/26/2024.