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

Glorious Adult Family Home LLC

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

RE: Glorious Adult Family Home LLC License # 756086

Dear Provider:

This letter addresses Compliance Determination(s) 60555 (Completion Date 06/03/2025) and 58574 (Completion Date 04/30/2025).

The Department completed a follow-up inspection of your Adult Family Home on 06/03/2025 and found that you have corrected the violations listed in the Complaint report dated 04/30/2025. Your home is back in compliance as of 05/15/2025 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 388-76-10650-1, WAC 388-76-10650-2-b, WAC 388-76-10650-2-c, WAC 388-76-10198-4

The Department staff who did the on-site verification:
Meazawork Tekie, 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 62nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 756086	Compliance Determination # 58574
Plan of Correction	Glorious Adult Family Home LLC	Completion Date
Page 1 of 4	Licensee: Glorious Adult Family Home LLC	04/30/2025

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 04/24/2025 of:

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

This document references the following complaint number(s): 176527

The following sample was selected for review during the unannounced on-site visit: 4 of 3 current residents and 1 former residents.

The department staff that investigated the Adult Family Home:

Meazawork Tekie, 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

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Page 2 of 4	Licensee: Glorious Adult Family Home LLC	04/30/2025

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' Bourque
Residential Care Services

05/06/2025
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)

05/15/2025
Date

WAC 388-76-10650 Medical devices.

(1) The adult family home must not use a medical device with a known safety risk as a restraint or for staff convenience.

(2) Before a medical device with a known safety risk is used by a resident, the home must:

(b) Provide the resident and his or her family or legal representative with information about the device's benefits and safety risks to enable them to make an informed decision about whether to use the device;

(c) Ensure the resident's negotiated care plan includes how the resident will use the medical device; and

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to have a system in place to ensure that 1 of 4 residents (Resident 1) had risks and benefits explained, and included medical device use in their Negotiated Care Plan (NCP), before using [redacted]. This failure placed Resident 1 at risk of harm from entrapment and injury if the [redacted] were not used properly or appropriate for individual resident use.

Findings included....

Observation, on 04/24/2025 at 12:15 PM, showed Resident 1's [redacted] positioned against the left side of the wall with 1 half-sized [redacted] on both sides of their [redacted] Observation showed the [redacted] in the down position.

Record review of Resident 1's NCP, dated 02/15/2023, showed the AFH admitted Resident 1 on [redacted]/2023, with multiple diagnoses that included [redacted]. Resident 1's NCP showed AFH staff were to assist Resident 1 with bed mobility. Review showed Resident 1's NCP had not included the use of a [redacted].

Record review of Resident 1's medical records had not included a risks and benefit signed consent from Resident 1, or Resident 1's representative, for Resident 1's use of a [redacted]

In an interview, on 04/24/2025 at 12:49 PM, Staff A (Provider) stated that Resident 1 had transferred from another AFH with the [redacted] with both (right and left) [redacted]. Staff A stated that they had not informed Resident 1 or Resident 1's representative of the risks and benefits of the use of [redacted]. Staff A stated that they had not updated Resident 1's NCP to show the use of the [redacted]

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) 05/15/25.

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

Provider (or Representative) Cvijetic Date 05/15/25

WAC 388-76-10198 Adult family home Personnel records. The adult family home must keep documents related to staff in a place readily accessible to authorized department staff. These documents must be available during the staff's employment, and for at least two years following employment. The documents must include but are not limited to:

(4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on interview, and record review, the Adult Family Home (AFH) failed to have a system in place to ensure 2 of 2 staff (Staff A and Staff B) records were readily available for review and contained current background check records.

Statement of Deficiencies	License #: 756086	Compliance Determination # 58574
Plan of Correction	Glorious Adult Family Home LLC	Completion Date
Page 4 of 4	Licensee: Glorious Adult Family Home LLC	04/30/2025

Findings included...

Record review of AFH's personnel records showed the required background check results for Staff A, Provider, were last completed on 03/01/2023. Record review had not included Staff A's updated background check results.

Record review of AFH's personnel records showed the required interim fingerprint and background check results for Staff B (caregiver) were last completed on 12/13/2024. The record review had not included Staff B's final fingerprint and background check results.

In an interview, on 04/24/2025 at 12:49 PM, Staff A stated that they had completed the background check for themselves (Staff A) in September 2024, and had received the final background check results for Staff B. Staff A stated that they had not stored them at the AFH.

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) 05/15/25 .

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

Provider (or Representative) — Date 05/15/25