



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

#1 Amen Adult Family Home LLC
#1 Amen Adult Family Home LLC
7339 NE 140th St
Kirkland, WA 98034

RE: #1 Amen Adult Family Home LLC License # 755603

Dear Provider:

This letter addresses Compliance Determination(s) 66559 (Completion Date 10/02/2025) and 65016 (Completion Date 09/10/2025).

The Department completed a follow-up inspection of your Adult Family Home on 10/02/2025 and found that you have corrected the violations listed in the Full report dated 09/10/2025. Your home is back in compliance as of 09/17/2025 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 388-76-10750-1, WAC 388-76-10750-7

The Department staff who did the on-site verification:
Chrissy Exe, Long-Term Care Licensor

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

Sincerely,

Lydia Owusu-Acheampong

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



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DEPARTMENT OF SOCIAL AND HEALTH SERVICES
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20425 72nd Avenue S, Suite 400, Kent, WA 98032

Statement of Deficiencies	License #: 755603	Compliance Determination # 65016
Plan of Correction	#1 Amen Adult Family Home LLC	Completion Date
Page 1 of 3	Licensee: #1 Amen Adult Family Home LLC	09/10/2025

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 09/02/2025 and 09/04/2025 of:

#1 Amen Adult Family Home LLC
7339 NE 140th St
Kirkland, WA 98034

The following sample was selected for review during the unannounced on-site visit: 2 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Chrissy Exe, Long-Term Care 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

09.11.2025 08:04:15

State of Washington

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Statement of Deficiencies	License #: 755603	Compliance Determination # 65016
Plan of Correction	#1 Amen Adult Family Home LLC	Completion Date
Page 2 of 3	Licensee: #1 Amen Adult Family Home LLC	09/10/2025

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.

Lydia Owner-Ackleying
Residential Care Services

09/11/2025
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.

HAREGU Kidane
Provider (or Representative)

09/17/2025
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;
- (7) Keep all toxic substances and hazardous materials in locked storage and in their original containers;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure toxic chemicals were kept in locked storage. The AFH also failed to ensure the home was kept in good repair. These failures placed 5 of 5 residents (Residents 1, 2, 3, 4, and 5) at risk of injury if they accessed toxic chemicals, and at risk for decreased quality of life.

Findings included...

<Toxic Chemicals>

Observation, on 09/02/2025 at 3:31 PM, showed the cabinet underneath the sink was secured shut with a child proof lock. Further observation showed various cleaning supplies underneath the sink. These cleaning supplies included dishwasher detergent pods, 409 multi-surface cleaner, and Shout spray. Further observation, at 3:46 PM, showed a jug of laundry detergent on top of the washing machine. The washing machine and dryer were not in a locked room.

In an interview, on 09/02/2025 at 3:46 PM, Staff A, Entity Representative, stated that they were aware cleaning supplies need to be kept in locked storage. Staff A stated that the laundry detergent should be locked and was left out by a caregiver by mistake.

09.11.2025 08:04:15

State of Washington

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Statement of Deficiencies	License #: 755803	Compliance Determination # 65016
Plan of Correction	#1 Amen Adult Family Home LLC	Completion Date
Page 3 of 3	Licensee: #1 Amen Adult Family Home LLC	09/10/2025

In an interview, on 09/04/2025 at 11:10 AM, Staff A stated that they did not know child locks did not constitute an appropriate locking device to secure toxic chemicals.

<Environment>

Observation, on 09/02/2025 at 4:01 PM, showed environmental damage in the area of the home closest to Bedroom █ (Resident 4's bedroom). There was a hole in the drywall inside the bedroom on the lower portion of the wall across from Resident 4's bed. The hole was observed as being at least 6 inches long. The lower portions of the wall in Bedroom █ appeared visibly scuffed with chipped paint. The doorframe in Bedroom █ was damaged and appeared to be missing parts of the wooden doorframe. The lower portion of the bedroom door had paint and wood chipped from it.

In an interview, at 4:10 PM, Staff A stated that the damage was caused by Resident 4 mobilizing in their █. Staff A stated that Resident 4's care team had stated that they do not think Resident 4 can safely mobilize independently using a █. Staff A stated that a manual wheelchair had been ordered for Resident 4 but had not arrived.

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, #1 Amen Adult Family Home LLC is or will be in compliance with this law and / or regulation on
 (Date) 09/17/2025.

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

Provider (or Representative) MAREGE K. MANNING

Date 09/17/2025



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

09/11/2025

#1 Amen Adult Family Home LLC
#1 Amen Adult Family Home LLC
7339 NE 140th St
Kirkland, WA 98034

RE: #1 Amen Adult Family Home LLC # 755603

Dear Provider:

The Department completed a full inspection of your Adult Family Home on 09/10/2025 and found that your home does not meet the Adult Family Home Licensing requirements.

The Department:

- Wrote the enclosed report; and
- May take licensing enforcement action based on many deficiency listed on the enclosed report; and
- May inspect the home to determine if you have corrected all deficiencies; and
- Expects all deficiencies to be corrected within the timeframe accepted by the department.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately;
- Contact the Field Manager for clarifications related to the Statement of Deficiencies (SOD);
- Within 10 calendar days after you receive this letter, complete and return the enclosed 'Plan/Attestation Statement';
 - Sign and date the enclosed report;
 - For each deficiency, indicate the date you have or will correct each deficiency;
 - Return the Plan/Attestation Statement and report with signatures to:

Lydia Owusu-Acheampong, Community Field Manager
Residential Care Services
Region 2, Unit G
Preferred methods:

eFax: (253) 395-5071

Email: rcsregion2email@dshs.wa.gov

Optional method:

20425 72nd Avenue S, Suite 400

Kent, WA 98032

- Complete correction(s) within 45 days, or sooner if directed by the Department, after review of your proposed correction dates.

- Have your plan approved by the Department.

Consultation(s):

In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

WAC 388-76-10430 Medication system.

(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 ;

The Adult Family Home (AFH) failed to ensure that Resident 1's September 2025 medication log (ML) was accurate and up to date. Resident 1's prescribed guaifenesin (a cough medicine) 600 milligram (mg) tablets, located in the medication bin, were not listed on Resident 1's September 2025 ML. Staff A, Entity Representative, stated that this medication was not discontinued. Staff A corrected the deficiency on-site at the time of inspection by adding the guaifenesin tablets to Resident 1's September 2025 ML.

WAC 388-76-10900 Documentation of emergency evacuation drills Required. The adult family home must document the following for all emergency evacuation drills:

(4) Whether the drill was a full or partial emergency evacuation; and

The Adult Family Home (AFH) failed to ensure that the evacuation drill logs accurately identified the date of the last full evacuation drill. Staff A, Entity Representative, stated that the last full evacuation occurred on 05/17/2025. Staff A stated that this was mistakenly documented as a partial evacuation drill. This deficiency was corrected on site at the time of inspection by Staff A.

You Are Not:

- Required to submit a plan of correction for the consultation deficiency or deficiencies stated in this letter and not listed on the enclosed report.

You May:

- Ask for a informal dispute resolution meeting, according to the attached 'Informal Dispute Resolution' instructions; and
- Ask questions and provide written information to help clarify or dispute the deficiencies.
- Contact me for clarification of the deficiency or deficiencies found.

If You Have Any Questions:

- Please contact me at (253)234-6007.

Sincerely,

Lydia Owusu-Acheampong

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

Enclosure

**Plan
(Plan of Correction)**

You Must:

Return the plan, on the enclosed report, within 10 calendar days after you receive this letter.

Include the following in your plan for each deficiency:

- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency.

Send your plan to:

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

Preferred methods:

eFax: (253) 395-5071

Email: rcsregion2email@dshs.wa.gov

Optional method:

20425 72nd Avenue S, Suite 400

Kent, WA 98032

You May:

Request an Informal Dispute Resolution (IDR) meeting within 10 working days after the date you receive this letter. You **must** use an '**IDR Request Form**' for **each** citation or enforcement you plan to dispute. You can find this form and directions on the IDR Adult Family Home web page at: <https://www.dshs.wa.gov/altsa/idr>

Provider Process for Choosing a Panel or Traditional IDR:

You may only choose a **Panel IDR** if you are disputing **three or fewer** citations or enforcement actions. You may choose a **Traditional IDR** regardless of the number of citations or enforcement actions you intend to dispute. If you choose a **Panel IDR**, all documents supporting your dispute must be submitted within 20 working days after the date you receive this letter. For **Panel IDRs** the program will not consider any documents submitted after the 20 working day deadline. For **Traditional IDRs** you should submit documents supporting your dispute at least **seven** days prior to the date of the IDR meeting.

Send your request and supporting documents to:

Email: RCSIDR@dshs.wa.gov; or
Fax: (360) 725-3225

09/17/2025

Haregu Kidane Provider

#1Amen Adult Family Home

7339 NE 140TH ST KIRKLAND, WA 98034

P: 206-356-0899

E: amenadult@gmail.com

F: 206-445-7998

Deficiency Correction

Dear RCS Representative,

According to WAC 388-76-10750, Safety and Maintenance (page 8, corrected):

1. The home was repaired on 09/16/2025. In the bedroom, the hole was fixed, and all doors were replaced. Pictures of the repairs are attached to this mail.
2. Regarding toxic substances and hazardous materials: the storage under the kitchen sink was changed from a baby lock to a magnetic lock on 09/05/2025, consistent with the other magnetic locks in the home. It is now secure and safe. All chemicals, including laundry detergent, are kept locked.

Thank you