STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

ANGELLS ON WHIDBEY ADULT FAMILY HOME LLC
Angells on Whidbey Adult Family Home
905 Burroughs Ave
Oak Harbor, WA 98277

RE: Angells on Whidbey Adult Family Home License # 752625

Dear Provider:

This letter addresses Compliance Determination(s) 82034 (Completion Date 08/11/2026) and 75645 (Completion Date 04/10/2026).

The Department completed a follow-up inspection of your Adult Family Home on 08/11/2026 and found that you have corrected the violations listed in the Complaint report dated 04/10/2026. Your home is back in compliance as of 05/21/2026 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 388-76-10673, WAC 388-76-10673-1, WAC 388-76-10673-1-a, WAC 388-76-10673-1-b, WAC 388-76-10673-2, WAC 388-76-10673-2-a, WAC 388-76-10673-2-b

The Department staff who did the off-site verification:
Jennifer Nichols, Community Complaint Investigator

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

Sincerely,

Nicholette Flynn

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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Statement of Deficiencies	License #: 752625	Compliance Determination # 75645
Plan of Correction	Angells on Whidbey Adult Family Home	Completion Date
Page 1 of 4	Licensee: ANGELLS ON WHIDBEY ADULT FAMILY HOME LLC	04/10/2026

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 04/09/2026 of:

Angells on Whidbey Adult Family Home
905 Burroughs Ave
Oak Harbor, WA 98277

This document references the following complaint number(s): 218963

The following sample was selected for review during the unannounced on-site visit: 4 of 4 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Jennifer Nichols, Community Complaint Investigator

From:
DSHS, Home and Community Living 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.

Scotti Bowen IDR Program Manager signed for Region 2 — 07/16/2026
Residential Care Services — 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) — 7/21/2026 Date

WAC 388-76-10673 Abuse and neglect reporting Mandated reporting to department Required.

(1) In accordance with chapter 74.34 RCW, all providers, entity representatives, resident managers, owners, caregivers, staff, and students that provide care and services to residents, are mandated reporters and must immediately report to the department when there is:

(a) A reasonable cause to believe that abandonment, abuse, exploitation, financial exploitation, or neglect of a vulnerable adult has occurred; or

(b) A reason to suspect that sexual assault of a vulnerable adult has occurred.

(2) Reports must be made to:

(a) The centralized toll free telephone number provided by the department; and

(b) The appropriate law enforcement agencies, as required under chapter 74.34 RCW.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure that an allegation of abuse for 1 of 4 residents (Resident 1) was immediately reported to the department's centralized toll-free telephone number or online incident report and law enforcement. This failure resulted in the delayed investigation of Resident 1's allegation of abuse.

Findings included...

Observation, on 04/09/2026 at 12:15 PM, showed Resident 1, 2, 3 & 4 resided at the AFH.

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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

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

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Findings included…

Observation, on 04/09/2026 at 12:15 PM, showed Resident 1, 2, 3 & 4 resided at the AFH.

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Review of the AFH's undated policy, titled "Abuse, Neglect and Exploitation," showed the AFH required staff to report any suspected allegation of sexual or physical assault to the Department's toll-free telephone number and local law enforcement as soon as the home is protected from further harm.

Record review showed the AFH admitted Resident 1 on [redacted]/2026 with multiple diagnoses. Resident 1's Negotiated Care Plan, dated 03/16/2026, showed Resident 1 required caregiver assistance with activities of daily living.

Review of the AFH's incident log showed Resident 1 had an allegation that Staff C (Caregiver) sexually abused them, dated 03/09/2026 at 8:22 PM. Review of the AFH's incident log showed Resident 1 had an allegation that Staff C sexually abused and Staff D (Caregiver) physically abused them, dated 03/25/2026 at 8:11 PM.

Record review of the Department's electronic Secure Tracking and Reporting System on 04/09/2026 at 7:00 AM, showed that the AFH filed a report, on 04/02/2026 at 2:45 PM, stating that Resident 1 had multiple allegations of theft, neglect, physical, and sexual abuse "beginning 3/10/2026 to 04/02/2026".

In an interview, on 04/09/2026 at 12:25 PM, Resident 1 stated that Staff C would always kiss them when they did not want it. Resident 1 stated that they reported the allegation of Staff C kissing them to the AFH and said, "they think I am crazy". Resident 1 stated that they did not experience any physical abuse or theft at the AFH.

In an interview, on 04/09/2026 at 1:54 PM, Staff A (Entity Representative) stated that on 03/09/2026 Resident 1 reported to Staff A that Staff C allegedly kissed them, then changed their allegation during their conversation with Staff A. Staff A reported that they investigated Resident 1's allegation and believed no abuse occurred. Staff A stated they notified Resident 1's family, social worker, and the delegating nurse. Staff A stated that on 03/25/2026 Resident 1 reported to Staff A that Staff C allegedly kissed them and Staff D allegedly physically abused them. Staff A reported that they investigated Resident 1's allegation and believed no abuse occurred. Staff A stated they notified Resident 1's family, social worker and the delegating nurse.

In an interview, on 04/09/2026 at 1:54 PM, Staff A stated that they made a report to the Department on 04/02/2026 instead of immediately notifying the Department on 03/09/2026 and 03/25/2026 of Resident 1's allegations of sexual and physical abuse because they did not believe any abuse occurred. Staff A stated that they did not make any report to notify law enforcement of Resident 1's allegations of sexual and physical abuse on 03/09/2026 and 03/25/2026 because they did not believe any abuse occurred.

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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, Angells on Whidbey Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 5/21/2026.

In addition, I will implement a system to monitor and ensure continued compliance with this requirement. – We will ensure all false reports are forwarded to APS to investigate.

C&L
Provider (or Representative)

5/21/2026
Date

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Provider (or Representative) Date

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