



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

LILYA SOLOVEY
GARDEN OF LOVE AND SERVICE AFH
12211 SE 259TH PL
KENT, WA 98030

RE: GARDEN OF LOVE AND SERVICE AFH License # 655100

Dear Provider:

This letter addresses Compliance Determination(s) 63454 (Completion Date 07/31/2025) and 58541 (Completion Date 06/06/2025).

The Department completed a follow-up inspection of your Adult Family Home on 07/31/2025 and found that you have corrected the violations listed in the Full report dated 06/06/2025. Your home is back in compliance as of 06/09/2025 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 388-76-10380-4, WAC 388-76-10885-2, WAC 388-76-10885-3

The Department staff who did the on-site verification:

Karen Beardsley, NCI

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

Sincerely,

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

This document was prepared by Residential Care Services for the Locator website.



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Statement of Deficiencies	License #: 655100	Compliance Determination # 58541
Plan of Correction	GARDEN OF LOVE AND SERVICE AFH	Completion Date
Page 1 of 4	Licensee: LILYA SOLOVEY	06/06/2025

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 04/23/2025 of:

GARDEN OF LOVE AND SERVICE AFH
12211 SE 259th PI
Kent, WA 98030

The following sample was selected for review during the unannounced on-site visit: 2 of 3 current residents and 0 former residents.

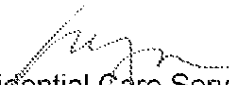
The department staff that inspected the Adult Family Home:

Karen Beardsley, NCI

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit E
20425 72nd Avenue S, Suite 400
Kent, WA 98032

This document was prepared by Residential Care Services for the Locator website.

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

06/06/2025
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)

Date

WAC 388-76-10380 Negotiated care plan Timing of reviews and revisions. The adult family home must ensure that each resident's negotiated care plan is reviewed and revised as follows:

(4) At least every twelve months.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home failed to review and revised the Negotiated Care Plan (NCP) for 1 of 3 residents (Resident 3) at least every 12 months. This failure placed Resident 3 at risk of unmet care needs.

Findings included...

Review of Resident 3's file showed an NCP dated 02/24/2024. No updated NCP was found that was due to be review and revised by 02/24/2025.

In an interview on 04/23/2024 at 11:02 AM, Staff C, Caregiver, stated that they had not realized the NCP was due for an update and that they did not have one completed.

On 04/23/2025 at 1:03 PM, Staff A, Provider, stated that they understood that Resident 3's NCP was overdue and that they would begin working on it.

This document was prepared by Residential Care Services for the Locator website.

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, GARDEN OF LOVE AND SERVICE AFH is or will be in compliance with this law and / or regulation on (Date)_____.

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

Provider (or Representative)

Date

WAC 388-76-10885 Elements of emergency evacuation floor plan. The adult family home must develop an emergency evacuation floor plan for each level of the home that:

- (2) Illustrates the emergency evacuation route(s) to exit the home, with the route to the emergency exit door being easily identifiable; and
- (3) Identifies the designated safe location for the residents to meet outside the home.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure the home's emergency evacuation floor plan included illustration of the emergency evacuation route to exit the home, an identifiable route to the emergency exit door and identifies designated safe location for the resident to meet outside the home. This failure placed the residents at risk for not being able to navigate through the home to a safe location in case of emergency.

Findings included...

On 04/23/2025 at 8:10 AM, observation showed the AFH evacuation map was posted beside the front door and in the dining area.

Review of the evacuation maps posted on these two locations showed no path was included to identify where residents should evacuate to in an emergency and no meeting place was marked.

On 04/23/2025 at 9:20 AM, Staff A, Provider, during an interview stated that all residents required assistance to evacuate.

On 04/23/2025 at 1:03 PM, during an interview, Staff A stated that they didn't realize the evacuation map needed arrows to show evacuation route or that the meeting place needed to be clearly labeled but that they would add them.

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, GARDEN OF LOVE AND SERVICE AFH is or will be in compliance with this law and / or regulation on (Date)_____.

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

Provider (or Representative)

Date