STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

3906-172nd St NE, Suite #100, Arlington, WA 98223

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 11/14/2025 of:

SYLVIAS ADULT HOME
707 NE Gould St
Coupeville, WA 98239

This document references the following complaint number(s): 201674, 202547

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

The department staff that investigated the Adult Family Home:

Megan Wylie, Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit B
3906-172nd St NE, Suite #100
Arlington, WA 98223

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.

Nicholette Flynn
Residential Care Services

1/21/2026
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 388-76-10720 Electronic monitoring equipment Audio monitoring and video monitoring.

(1) Except as provided in this section or in WAC 388-76-10725 , the adult family home must not use the following in the home or on the premises:

(a) Audio monitoring equipment; or

(3) The home must notify all residents in writing of the video monitoring equipment. The home must:

(a) Identify in the written notification each person or organization with access to electronic monitoring; and

(b) Retain an acknowledgment that has been signed and dated by both the resident and the home that states in writing that the resident has received this notification.

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH)failed toensure2 of 5residents (Resident 1 and 3)had a consent form for audiomonitoring that included all required information and 5 of 5 residents (Residents 1, 2, 3, 4, and 5) had a consent form for video monitoring that included all the required information. This failure placedResidents 1, 2, 3,4, and 5'sprivacyat risk forexploitationand decreased quality of life.

Findings included...

Observations on 11/14/2025 at 9:30 AM, showed two cameras at the front of the home and a camera at the back door of the home as well as a audio only baby monitor in Residents 1's bedroom and Resident 3's bedroom. Receivers were observed near the provider's sleeping area at the opposite side of the home.Staff A, Resident Manager

and Entity Representative, was able to show a recent video that did not contain any audio from one of the cameras that faced the front driveway and yard.

Resident 1:
Record review showed the AFH admitted Resident 1 to the home with multiple diagnoses.Review of Resident 1's current assessment, dated 08/30/2024, showed Resident 1 was independent with walking and used a walker, and was independent with night time mobility and toileting. Record Review showed no mention of audio or video monitoring in Resident 1's assessment. Review of Resident 1's current Negotiated Care Plan (NCP), dated 09/02/2024, showed the "fall risk" box on page 8 was not checked, and there was no mobility needs identified. Resident 1's NCP also showed Resident 1 was independent with toileting and that the resident did not get up to use the bathroom at night.

Staff A was able to provide a email from the resident's representative, dated 11/19/2025, that gave consent for the AFH to place a monitor in Resident 1's room for safety purposes. The email did not include any other directions or information.

Review of Resident 1's record did not show any documentation that Resident 1 or Resident 1's representative was notified of video monitoring that was being conducted onsite.

Resident 2:
Record review showed Resident 2 was admitted to the home on [redacted]/2023. Review of Resident 2's record did not show any documentation that Resident 2 or Resident 2's representative was notified of video monitoring that was being conducted onsite.

Resident 3:
Record review showed the AFH admitted Resident 3 with multiple diagnoses.Review of Resident 3's current assessment, dated 02/12/2025, showed Resident 3 had impaired balance, was a high risk for falls and used a walker and wheelchair for mobility. Resident 3's assessment stated that Resident 3 may try to get out of bed to use the bathroom and that a bed alarm had been successfully used. Record Review showed no mention of audio or video monitoring in Resident 3's assessment. Review of Resident 3's current Negotiated Care Plan (NCP), dated 02/12/2025, showed the "fall risk" box on page 8 was checked and stated a bed alarm had been successfully used. The mobility section in Resident 3's NCP also showed that Resident 3 required stand by assistance with ambulation and assistance with rising from a bed or chair.

Staff A was able to provide a email from the resident's representative, dated 11/17/2025, that stated they gave consent to the AFH to place a monitor in Resident 3's room due to the resident's fall risk and the need for assistance with ambulation. The email did not include any other directions or information.

Review of Resident 3's record did not show any documentation that Resident 3 or Resident 3's representative was notified of video monitoring that was being conducted onsite.

Resident 4:
Record review showed Resident 4 was admitted to the home on [redacted]/2018. Review of Resident 4's record did not show any documentation that Resident 4 or Resident 4's representative was notified of video monitoring that was being conducted onsite.

Resident 5:
Record review showed Resident 5 was admitted to the home on [redacted]/2021. Review of Resident 5's record did not show any documentation that Resident 5 or Resident 5's representative was notified of video monitoring that was being conducted onsite.

In an interview on 01/14/2025 at 12:03 PM, Staff A stated that they installed the exterior cameras in 2023 in response to neighborhood crime and they were not aware of the regulations that required notifications to be provided to resident and/or resident representatives and maintained in the resident's records.

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, SYLVIAS ADULT HOME 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 388-76-10380 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 record review and interview, the Adult Family Home (AFH) failed to ensure 1 of 2 sampled residents (Resident 1) had a negotiated care plan (NCP) that was reviewed and revised at least every twelve months. This failure placed the Resident 1 at risk of unmet care needs.

Findings included...

RESIDENT 1

Record review showed the AFH admitted Resident 1 with multiple medical diagnoses. Resident 1's record showed their NCP was last signed and dated by Resident 1's guardian on 09/03/2024 and Staff A (Resident Manager and Entity Representative) on 09/03/2024.

In an interview, on 01/14/2026 at 12:03 PM, Staff A stated that they were unaware resident's NCP's were overdue for review and signatures.

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, SYLVIAS ADULT HOME 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