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

A Love and Care AFH LLC
*A Love and Care AFH
4244 S 184th St
SeaTac, WA 98188

RE: *A Love and Care AFH License # 754770

Dear Provider:

This letter addresses Compliance Determination(s) 61173 (Completion Date 06/30/2025) and 57715 (Completion Date 04/23/2025).

The Department completed a follow-up inspection of your Adult Family Home on 06/30/2025 and found that you have corrected the violations listed in the Full report dated 04/23/2025. Your home is back in compliance as of 04/12/2025 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 388-76-10430-2-d, WAC 388-76-10130-3, WAC 388-112A-0600-1

The Department staff who did the on-site verification:
Angelica Rios, ALF Licensor

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

Sincerely,

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

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

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Statement of Deficiencies	License #: 754770	Compliance Determination # 57715
Plan of Correction	*A Love and Care AFH	Completion Date
Page 1 of 4	Licensee: A Love and Care AFH LLC	04/23/2025

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 04/09/2025 of:
*A Love and Care AFH
4244 S 184th St
SeaTac, WA 98188

The following sample was selected for review during the unannounced on-site visit: 2 of 4 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Angelica Rios, ALF 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

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Page 2 of 4	Licensee: A Love and Care AFH LLC	04/23/2025

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.

Residential Care Services

5-1-2025
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)

05/02/2025
Date

WAC 388-76-10430 Medication system.

(2) When providing medication assistance or medication administration for any resident, the home must ensure each resident:

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure medication was received as prescribed for 1 of 2 sampled residents (Resident 2). This failure placed Resident 2 at risk of worsening condition from not receiving medication as prescribed.

Findings included...

During a visit on 04/09/2025 at 10:10 AM observation showed, Resident 2 lived in and received medication assistance from the AFH.

Review of Resident 2's pharmacy-generated April 2025 Medication Administration Record (MAR) showed Resident 2 was prescribed Fexofenadine HCl 180 Milligrams (mg), take 1 tablet by mouth every morning for allergies.

Observation on 04/09/2025 at 2:00 PM, showed Resident 2's medication storage container contained an open bottle of Fexofenadine HCl 60 mg non drowsy allergy relief medication.

During an interview on 04/09/2025 at 2:15 PM, Staff A, Entity Representative/Resident

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Manager, stated that they gave 1 tablet of the Fexofenadine 60 mg non drowsy allergy medication to Resident 2 every morning. Staff A further stated that they marked this on Resident 2's MAR as Fexofenadine 180 mg. Additionally, Staff A stated that they did not realize the medication dosage they provided to Resident 2 did not match their prescription. Staff A stated that they would ensure Resident 2 received the correct allergy medication dosage.

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, *A Love and Care AFH is or will be in compliance with this law and / or regulation on (Date) 04/10/2025 .

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

Provider (or Representative) Date 05/02/2025

WAC 388-112A-0600 What is continuing education and what topics may be covered in continuing education?

(1) Continuing education is annual training designed to promote professional development and increase a long-term care worker's knowledge, expertise, and skills. DSHS must approve continuing education curricula and instructors.

WAC 388-76-10130 Qualifications Provider, entity representative, and resident manager. The adult family home must ensure that the provider, entity representative on behalf of an entity provider, and resident manager have the following minimum qualifications:

(3) Completion of the training requirements that were in effect on the date they were hired or became licensed providers, including the requirements described in chapter 388-112A WAC;

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 2 of 2 sampled staff (Staff A, Entity Provider/Resident Manager and Staff C, Caregiver) completed twelve hours of continuing education as required. This failure placed all residents (Residents 1, 2, 3, and 4) at risk of receiving care not up to current caregiving standards.

Findings included...

During a visit on 04/09/2025 at 10:10 AM observation showed, Residents 1, 2, 3, and 4, lived in and received care from the AFH. Further observation showed Staff A provided

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care to all residents.

Review of Staff A's personnel records showed Staff A had a current Nursing Assistant Certification. Further review showed their birthdate was November 7th. Additional review showed Staff A had no documentation of continuing education hours for 2023 and 2024.

Review of Staff C's personnel records showed Staff C was hired on 08/07/2021. Further review showed Staff C had a current Nursing Assistant Certification and their birthdate was June 6. Additional review showed no documentation of continuing education hours in 2023 or 2024.

During an interview on 04/09/2025 at 12:27 PM, Staff A stated that they did not receive any continuing education credits in the last two years. Staff A further stated that they did not realize they had to complete 12 hours of continuing education every year. Staff A stated that their most recent continuing education hours were from 2022. Additionally, Staff A stated that they would complete continuing education requirements and ensure Staff B receive 12 hours of continuing education every year.

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, *A Love and Care AFH is or will be in compliance with this law and / or regulation on (Date) 04/12/2025.

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

Provider (or Representative) 05/02/2025 Date

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