



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Great Foundation LLC
Benevolent AFH
11821 102ND PLACE NE
KIRKLAND, WA 98034

RE: Benevolent AFH License # 754951

Dear Provider:

This letter addresses Compliance Determination(s) 72310 (Completion Date 03/02/2026) and 68706 (Completion Date 12/03/2025).

The Department completed a follow-up inspection of your Adult Family Home on 03/02/2026 and found that you have corrected the violations listed in the Full report dated 12/03/2025. Your home is back in compliance as of 01/17/2026 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 388-76-10015-1, WAC 388-76-10030-2, WAC 388-76-10463-3, WAC 388-76-10530-2

The Department staff who did the on-site verification:

Jimmie Jordan, NCI
Vadim Panitkov, NCI

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



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

Statement of Deficiencies	License #: 754951	Compliance Determination # 68706
Plan of Correction	Benevolent AFH	Completion Date
Page 1 of 7	Licensee: Great Foundation LLC	12/03/2025

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 11/13/2025 of:

Benevolent AFH
11821 102ND PLACE NE
KIRKLAND, WA 98034

The following sample was selected for review during the unannounced on-site visit: 2 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Jimmie Jordan, NCI

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

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.

Staci Dilg, IDR PM for Reg 2G
Residential Care Services

January 13, 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.

DYAH SULISTYANINGRUM
Provider (or Representative)

1/13/2026
Date

WAC 388-76-10015 License Adult family home Compliance required.

(1) The licensed adult family home must comply with all the requirements established in chapters 70.128, 70.129, 74.34 RCW, this chapter and other applicable laws and regulations including chapter 74.39A RCW; and

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure that 1 of 6 bedrooms (Bedroom ■) was measured and licensed to ensure they met the required floor space of at least 120 feet for double occupancy before allowing two residents (Resident 3 and Resident 8) to occupy a bedroom licensed for single occupancy. This failure placed Residents 3 and 8 at risk of decreased quality of life.

Findings included...

Review of the AFH's license history at the Department's Secure Tracking and Reporting System (STARS) on 11/13/2025 showed the AFH was initially licensed on 03/29/2021.

Record review of the Adult Family Home Floor Plan Key, signed by Staff A, Provider, on 09/10/2021, showed Bedroom ■ was licensed for one capacity.

Observation, on 11/13/2025 at 10:43 AM with Staff A, showed Bedroom ■ had 2 beds.

In an interview, on 11/13/2025 at 10:43 AM, Staff A stated that Bedroom ■ was occupied by Residents 3 and 8.

In an interview, on 11/13/2025 at 4:27 PM, Staff B, Caregiver, stated that Resident 8 resided in Bedroom [REDACTED] and their roommate was their [REDACTED] Resident 3. Staff B stated that Resident 8 had been at the AFH for 2 years and had not slept upstairs at the other AFH since being admitted.

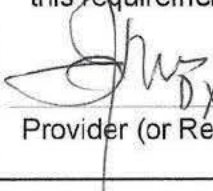
In an interview, on 11/13/2025 at 5:00 PM, Resident 8 stated that they were admitted to the AFH in [REDACTED] 2023, a couple of weeks after their [REDACTED] Resident 3, had been admitted to the AFH. Resident 8 stated that they never slept in the bedroom of the other AFH since being admitted. Resident 8 stated that all their possessions were in Bedroom [REDACTED] because it was difficult for them to go up and down the stairs.

In an interview, on 11/13/2025 at 4:00 PM, Staff A stated that Resident 3 and Resident 8 have been [REDACTED] for 77 years and wanted to be together until "the end."

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, Benevolent AFH is or will be in compliance with this law and / or regulation on (Date) 01/17/2026

(LDCC 12/03/2025).

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


DYAN SULSTROW
Provider (or Representative)

01/13/2026

Date

(Receipt amended)

WAC 388-76-10030 Adult family home capacity.

(2) The licensed capacity number will be listed on the adult family home license and the home must ensure that the number of residents in the home does not exceed the licensed capacity.

This requirement was not met as evidenced by:

Based on observation, interview, and record review the Adult Family Home (AFH) provider did not ensure the capacity remained at the licensed capacity (or lower) when they allowed 2 of 2 residents from another AFH to reside at the AFH. This failure placed all residents at risk of not receiving adequate care as required and placed them at risk of harm, if there was a need to evacuate in case of emergency.

Findings included...

Record review of the AFH Summary Report using the department's Secure Tracking and Reporting System, showed the AFH was licensed and approved for 6 beds.

Observation, on 11/13/2025 at 9:50 AM, showed 6 residents (Resident 1, Resident 2, Resident 3, Resident 4, Resident 5 and Resident 6) in the home receiving care and services, along with Resident 7 and Resident 8 from another AFH.

In an interview, on 11/13/2025 at 4:27 PM, Staff B, Caregiver, stated that Resident 7 can no longer go upstairs to the other AFH. Staff B stated that Resident 7 last went upstairs in 2024. Staff B stated that Resident 7 slept in a recliner in the family room during the night and sits at the dining room table during the day.

In an interview, on 11/13/2025 at 4:27 PM, Staff B stated that Resident 8 resided in Bedroom [REDACTED] as a roommate with their [REDACTED] Resident 3. Staff B stated that Resident 8 had been at the AFH for 2 years and had not slept upstairs at the other AFH since being admitted.

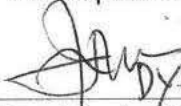
In an interview, on 11/13/2025 at 5:00 PM, Resident 8 stated that they were admitted to the AFH in [REDACTED] 2023, a couple of weeks after their [REDACTED] Resident 3, was admitted to the AFH. Resident 8 stated that they had never slept in the bedroom of the other AFH since being admitted. Resident 8 stated that all their possessions were in Bedroom [REDACTED] because it was difficult for them to go up and down the stairs.

In an interview, on 11/13/2025 at 4:00 PM, Staff A, Provider, stated that Resident 3 and Resident 8 have been [REDACTED] for 77 years and wanted to be together until "the end." Staff A stated that Resident 7 was [REDACTED] and unable to go up and down the stairs, so they remained downstairs in the AFH.

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, Benevolent AFH is or will be in compliance with this law and / or regulation on (Date) 01/17/2026

(LCCC 12/03/2025)

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


DYAN SULISTYANINGRUM
Provider (or Representative)

01/13/2026

Date (Receipt Amended)

WAC 388-76-10463 Medication Psychopharmacologic. For residents who are given psychopharmacologic medications, the adult family home must ensure:

(3) The resident's negotiated care plan includes strategies and modifications of the environment and staff behavior to address the symptoms for which the medication is prescribed;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH), failed to include strategies, environmental modifications, and staff behaviors for symptoms of prescribed psychopharmacologic medications (medications used to treat mental health conditions) for 1 of 2 sampled residents (Resident 2) in their Negotiated Care Plan (NCP). This failure placed Resident 2 at risk of harm due to unmet mental health care needs.

Findings included...

Review showed that Resident had multiple disabling diagnoses including [REDACTED]

Observation with Staff A, Provider, on 11/13/2025 at 3:00 PM, showed Resident 2's medication bin contained Trazodone (medication for mood disorders) 150 milligrams (mg) tablets to be taken one tablet by mouth at bedtime.

Review of Resident 2's NCP, dated 11/15/2024, showed no strategies, environmental modifications, or directions for staff behaviors in response to symptoms for why the medication was prescribed.

During an interview, on 11/13/2025 at 2:35 PM, Staff A stated that they needed to revise Resident 2's NCP. Staff A stated that they are using updated software, so when the nurse comes to complete the next NCP, the psychopharmacological medications would be properly addressed.

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, Benevolent AFH is or will be in compliance with this law and / or regulation on (Date) 01/17/2026
(LDCC 12/03/2025).

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

DIXIE SULISTYANINGRUM 01/13/2026 (receipt amended)
Provider (or Representative) Date

WAC 388-76-10530 Resident rights Notice of rights and services.

(2) Upon receiving the notice of rights and services at admission and at least every 24 months, the home must ensure the resident and a representative of the home sign and date an acknowledgement stating that the resident has received the notice of rights and services as outlined in this section. The home must retain a signed and dated copy of both the notice of rights and services and the acknowledgement in the resident's record.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure the Resident or Resident Representatives for 1 of 2 sampled residents (Resident 2) had signed and dated the Notice of Rights and Services (Admission Agreement) at least once every twenty-four months. This failure placed Resident 2, and their representatives at risk for not being aware of the rules of the home, resident rights, care and services available in the home, and the charges associated with their care and services.

Findings included...

Record review showed the AFH admitted Resident 2 on [REDACTED] 2019 with multiple disabling diagnoses. Resident 2's Admission Agreement was signed and dated by their representative on 06/10/2023. The Admission Agreement was 5 months overdue for another signature and acknowledgement.

During an interview, on 09/30/2025 at 11:21 AM, Staff A, Provider, stated that they forgot to have Resident 2's guardian to sign the Admission Agreement when they last visited the AFH in September 2025. Staff A stated that Resident 2's guardian did not know how to use Docusign.

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, Benevolent AFH is or will be in compliance with this law and / or regulation on (Date) 01/17/2026.

(LDCC 12/03/2025)

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

 DYAN SULISTYANINGRUM 01/13/2026 (Receipt amended)

Provider (or Representative)

Date