



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Edens Villa, LLC
Eden's Villa, LLC
10714 38TH AVE NE
SEATTLE, WA 98125

RE: Eden's Villa, LLC License # 755038

Dear Provider:

This letter addresses Compliance Determination(s) 61087 (Completion Date 06/13/2025) and 59152 (Completion Date 05/09/2025).

The Department completed a follow-up inspection of your Adult Family Home on 06/13/2025 and found that you have corrected the violations listed in the Full report dated 05/09/2025. Your home is back in compliance as of 05/15/2025 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 388-76-10750-7, WAC 388-76-10463-3, WAC 388-76-10430-1, WAC 388-76-10530-2

The Department staff who did the on-site verification:
Claire Fleming, Long Term Care Surveyor

If you have any questions, please contact me at (206)914-5042.

Sincerely,

Renee' Bourque

Renee Bourque, Field Manager
Region 2, Unit K
Residential Care Services

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



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 755038	Compliance Determination # 59152
Plan of Correction	Eden's Villa, LLC	Completion Date
Page 1 of 6	Licensee: Edens Villa, LLC	05/09/2025

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 05/07/2025 of:

Eden's Villa, LLC
10714 38TH AVE NE
SEATTLE, WA 98125

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:

Claire Fleming, Long Term Care Surveyor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit K
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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Statement of Deficiencies	License #: 755038	Compliance Determination # 59152
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Page 2 of 6	Licensee: Edens Villa, LLC	05/09/2025

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.

[Signature]
Residential Care Services

05/14/2025
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.	
<i>Eden Embaye</i> Provider (or Representative)	5/15/25 Date

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(7) Keep all toxic substances and hazardous materials in locked storage and in their original containers;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to keep all toxic substances in a locked storage for 3 of 3 residents (Resident 1, Resident 2, and Resident 3). This failure placed Resident 1, Resident 2, and Resident 3 at risk for exposure to a harmful substance.

Findings included...

In a joint observation with Staff A, Provider, on 05/07/2025 at 10:43 AM, showed Clorox wipes (a brand of one-step cleaner and disinfectant), a Comet bottle (a brand of powdered abrasive cleaner, known for its ability to remove tough stains and disinfect surfaces, particularly in kitchens and bathrooms) and a bottle of Windex (a brand of glass and hard-surface cleaner) stored in unlocked storage area under the Bathroom 1 sink.

In a joint observation with Staff A on 05/07/2025 at 10:51 AM, laundry detergent (a cleaning agent liquid used to wash clothes and other fabrics) was found unsecured, on the floor in the laundry room. The laundry room had no physical lock on the door or an alternative way of being secured.

In an interview with Staff A on 05/07/2025 at 10:53 AM Staff A stated that all substances should have been locked at the time of inspection. Staff A stated that Staff B, Caregiver, might have been cleaning earlier in the day.

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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.

Alfredo Brown
Residential Care Services

05/14/2025
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 388-76-10750 Safety and maintenance. The adult family home must:

(7) Keep all toxic substances and hazardous materials in locked storage and in their original containers;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to keep all toxic substances in a locked storage for 3 of 3 residents (Resident 1, Resident 2, and Resident 3). This failure placed Resident 1, Resident 2, and Resident 3 at risk for exposure to a harmful substance.

Findings included...

In a joint observation with Staff A, Provider, on 05/07/2025 at 10:43 AM, showed Clorox wipes (a brand of one-step cleaner and disinfectant), a Comet bottle (a brand of powdered abrasive cleaner, known for its ability to remove tough stains and disinfect surfaces, particularly in kitchens and bathrooms) and a bottle of Windex (a brand of glass and hard-surface cleaner) stored in unlocked storage area under the Bathroom 1 sink.

In a joint observation with Staff A on 05/07/2025 at 10:51 AM, laundry detergent (a cleaning agent liquid used to wash clothes and other fabrics) was found unsecured, on the floor in the laundry room. The laundry room had no physical lock on the door or an alternative way of being secured.

In an interview with Staff A on 05/07/2025 at 10:53 AM Staff A stated that all substances should have been locked at the time of inspection. Staff A stated that Staff B, Caregiver, might have been cleaning earlier in the day.

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

Observation of Resident 1's April 2025 Medication Log (ML) on, 05/07/2025 at 11:21 AM, showed three psychopharmacologic medications with active physician orders were available in the AFH. The April 2025 ML included orders were: Mirtazapine 15 milligrams (a tetracyclic antidepressant used to treat depression), take 1 tablet by mouth at bedtime, Risperidone (an antipsychotic medication used to treat schizophrenia, bipolar disorder, or irritability associated with autistic disorder), take 0.5 milliliters (0.5 milligram) by mouth at bedtime, and Melatonin (medication used to treat delayed sleep phase and sleep disorders), 3 milligrams, take 1 tablet by mouth at bedtime as needed for insomnia (difficulty sleeping).

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, Eden's Villa, LLC 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 388-76-10463 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 record review, interview, and observation, 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 1) in their negotiated care plan (NCP). This failure placed Resident 1 at risk of harm due to unmet mental health care needs.

Findings included...

Record review of Resident 1's NCP created on 07/11/2024, indicated Resident 1 needed medication assistance. Resident 1's NCP created on 07/11/2024 indicated Resident 1 was not taking psychopharmacologic medications, but showed a diagnosis of [REDACTED] ([REDACTED]).

Observation of Resident 1's April 2025 Medication Log (ML) on, 05/07/2025 at 11:21 AM, showed three psychopharmacologic medications with active physician orders were available in the AFH. The April 2025 ML included orders were: Mirtazapine 15 milligrams (a tetracyclic antidepressant used to treat depression), take 1 tablet by mouth at bedtime, Risperidone (an antipsychotic medication used to treat schizophrenia, bipolar disorder, or irritability associated with autistic disorder), take 0.5 milliliters (0.5 milligram) by mouth at bedtime, and Melatonin (medication used to treat delayed sleep phase and sleep disorders), 3 milligrams, take 1 tablet by mouth at bedtime as needed for insomnia (difficulty sleeping).

Statement of Deficiencies	License #: 755038	Compliance Determination # 59152
Plan of Correction	Eden's Villa, LLC	Completion Date
Page 4 of 6	Licensee: Edens Villa, LLC	05/09/2025

During an interview on 05/07/2025 at 11:21 AM, Staff A, Provider, stated that they agreed Resident 1's NCP dated 07/11/2024 was missing strategies, environmental modifications, and staff behaviors in response for symptoms of Resident 1's depression, mental disorder and sleep related issue for which medication was prescribed.

During an interview on 05/07/2025 at 11:48 AM, Staff A stated that Resident 1 was still receiving their daily dosage of Mirtazapine and Risperidone. Staff A stated that Resident 1 was still receiving their melatonin as needed.

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, Eden's Villa, LLC is or will be in compliance with this law and / or regulation on (Date) 5/15/25

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

Eden Embaye
Provider (or Representative)

5/15/25
Date

WAC 388-76-10430 Medication system.

(1) If the adult family home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure that 3 of 3 residents (Resident 1, Resident 2, and Resident 3) medications were properly administered. This failure placed Resident 1, Resident 2, and Resident 3 at risk receiving contaminated medications not prescribed.

Findings included...

In an interview with Staff A, Provider, on 05/07/2024 at 10:08 AM, Staff A stated that Resident 1, Resident 2, and Resident 3 required medication assistance. Staff A stated that the medications for Resident 1, Resident 2, and Resident 3 need to be crushed prior to being administered.

During an interview on 05/07/2025 at 11:21 AM, Staff A, Provider, stated that they agreed Resident 1's NCP dated 07/11/2024 was missing strategies, environmental modifications, and staff behaviors in response for symptoms of Resident 1's depression, mental disorder and sleep related issue for which medication was prescribed.

During an interview on 05/07/2025 at 11:48 AM, Staff A stated that Resident 1 was still receiving their daily dosage of Mirtazapine and Risperidone. Staff A stated that Resident 1 was still receiving their melatonin as needed.

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, Eden's Villa, LLC 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

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This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure that 3 of 3 residents (Resident 1, Resident 2, and Resident 3) medications were properly administered. This failure placed Resident 1, Resident 2, and Resident 3 at risk receiving contaminated medications not prescribed.

Findings included...

In an interview with Staff A, Provider, on 05/07/2024 at 10:08 AM, Staff A stated that Resident 1, Resident 2, and Resident 3 required medication assistance. Staff A stated that the medications for Resident 1, Resident 2, and Resident 3 need to be crushed prior to being administered.

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Plan of Correction	Eden's Villa, LLC	Completion Date
Page 5 of 6	Licensee: Edens Villa, LLC	05/09/2025

A joint observation with Staff A and Staff C, Caregiver, on 05/07/2025 at 12:17 PM, showed a mortar and pestle (a tool used for grinding and crushing medications into a fine paste or powder) was used to crush medications for Resident 1, Resident 2 and Resident 3. Observation showed the mortar and pestle contained a residue (whatever remains after a process or action, like leftovers or remnants) from prior crushed medications.

During a joint interview with Staff A and Staff C on 05/07/2025 at 12:25 PM, Staff A stated that they did not clean the mortar and pestle in-between crushing each resident's medications. Staff A and Staff C stated that the agreed the AFH's current medication system could result in harmful cross-contamination (the physical movement or transfer of harmful bacteria from one person, object or place to another) for their AFH residents.

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, Eden's Villa, LLC is or will be in compliance with this law and / or regulation on (Date) 5/19/25.

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

Eden Embaye
Provider (or Representative)

5/15/25
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 record review and interview, the Adult Family Home (AFH) failed to provide 1 of 2 sampled residents (Resident 2) with a written notice of the resident's rights and services at least once every 24 months. This failure placed Resident 2 at risk of not being aware of house rules, rights, costs, and services provided by the AFH.

Findings included...

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A joint observation with Staff A and Staff C, Caregiver, on 05/07/2025 at 12:17 PM, showed a mortar and pestle (a tool used for grinding and crushing medications into a fine paste or powder) was used to crush medications for Resident 1, Resident 2 and Resident 3. Observation showed the mortar and pestle contained a residue (whatever remains after a process or action, like leftovers or remnants) from prior crushed medications.

During a joint interview with Staff A and Staff C on 05/07/2025 at 12:25 PM, Staff A stated that they did not clean the mortar and pestle in-between crushing each resident's medications. Staff A and Staff C stated that they agreed the AFH's current medication system could result in harmful cross-contamination (the physical movement or transfer of harmful bacteria from one person, object or place to another) for their AFH residents.

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, Eden's Villa, LLC 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

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Based on record review and interview, the Adult Family Home (AFH) failed to provide 1 of 2 sampled residents (Resident 2) with a written notice of the resident's rights and services at least once every 24 months. This failure placed Resident 2 at risk of not being aware of house rules, rights, costs, and services provided by the AFH.

Findings included...

Statement of Deficiencies	License #: 755038	Compliance Determination # 59152
Plan of Correction	Eden's Villa, LLC	Completion Date
Page 6 of 6	Licensee: Edens Villa, LLC	05/09/2025

Record review of Resident 2's negotiated care plan dated 04/11/2025, indicated Resident 2 was admitted to the AFH on [REDACTED] 2015. Record review of Resident 2's notice of rights and services indicated it was last reviewed in 2018.

During an interview on 05/07/2025 at 12:51PM, Staff A, Provider, stated that they thought the notice of rights and services only needed to be reviewed if there were changes made to the document.

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, Eden's Villa, LLC is or will be in compliance with this law and / or regulation on (Date) 5/9/25.

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

Eden Embaye
Provider (or Representative)

5/15/25
Date

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

Record review of Resident 2's negotiated care plan dated 04/11/2025, indicated Resident 2 was admitted to the AFH on [REDACTED] 2015. Record review of Resident 2's notice of rights and services indicated it was last reviewed in 2018.

During an interview on 05/07/2025 at 12:51PM, Staff A, Provider, stated that they thought the notice of rights and services only needed to be reviewed if there were changes made to the document.

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, Eden's Villa, LLC 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.

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