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

EDRALENE DONIA
PARADISE HAVEN AFH
25619 207th Pl SE
Kent, WA 98042

RE: PARADISE HAVEN AFH License # 750644

Dear Provider:

This letter addresses Compliance Determination(s) 79332 (Completion Date 06/23/2026) and 77335 (Completion Date 05/21/2026).

The Department completed a follow-up inspection of your Adult Family Home on 06/23/2026 and found that you have corrected the violations listed in the Full report dated 05/21/2026. Your home is back in compliance as of 06/03/2026 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 388-76-10146-3, WAC 388-112A-0110-1, WAC 388-76-10420-7-b, WAC 388-76-10506-1, WAC 388-76-10506-2, WAC 388-76-10506-2-a, WAC 388-76-10506-2-b, WAC 388-76-10506-2-c, WAC 388-76-10506-3, WAC 388-76-10506-4, WAC 388-76-10506-4-a, WAC 388-76-10506-4-b, WAC 388-76-10506-5, WAC 388-76-10506-5-a, WAC 388-76-10506-5-b, WAC 388-76-10506-5-c, WAC 388-76-10506-5-d, WAC 388-76-10506

The Department staff who did the on-site verification:
Marites Gatan, NCI

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

Sincerely,

Lydia Owusu-Acheampong, Community Field Manager

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

Region 2, Unit G
Residential Care Services

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

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 05/12/2026 of:
PARADISE HAVEN AFH
10824 SE 281ST STREET
AUBURN, WA 98092

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:

Marites Gatan, NCI

From:
DSHS, Home and Community Living Administration
Residential Care Services, Region 2 , Unit G
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 — 5-27-2026 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.

Edralene C. — Provider (or Representative)

06/03/2026 Date

WAC 388-112A-0110 May a home employ a long-term care worker who has not completed the 70-hour home care aide training or certification requirements?

(1) If an individual previously worked as a long-term care worker, but did not complete the training or certification requirements under RCW 18.88B.041 , 74.39A.074 , 74.39A.076 , and this chapter, an adult family home, enhanced services facility, or assisted living facility must not employ the individual to work as a long-term care worker until the individual has completed the required training or certification unless the date of hire has been reset as described under subsection (2) of this section.

WAC 388-76-10146 Qualifications Training and home care aide certification.

(3) All persons listed in subsection (2) of this section, must obtain the home-care aide certification if required by this section or chapters 246-980 or 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 that 1 of 2 staff (Staff C, Caregiver) who provided care to residents met certification requirements, specifically, obtaining the home care aide certification. This placed Residents 1, 2, 3, 4, and 5 at risk for receiving care from an unqualified caregiver.

Findings included...

Observation on 05/12/2026 at 10:36 AM showed Staff B, Caregiver providing care and services to five residents (Residents 1, 2, 3, 4, and 5).

In an interview on 05/12/2026 at 10:49 AM, Staff A, Entity Representative/Resident Manager stated that Staff C worked part time and did not live at the AFH.

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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.

Residential Care Services _____ 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 _____

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(3) All persons listed in subsection (2) of this section, must obtain the home-care aide certification if required by this section or chapters 246-980 or 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 that 1 of 2 staff (Staff C, Caregiver) who provided care to residents met certification requirements, specifically, obtaining the home care aide certification. This placed Residents 1, 2, 3, 4, and 5 at risk for receiving care from an unqualified caregiver.

Findings included…

Observation on 05/12/2026 at 10:36 AM showed Staff B, Caregiver providing care and services to five residents (Residents 1, 2, 3, 4, and 5).

In an interview on 05/12/2026 at 10:49 AM, Staff A, Entity Representative/Resident Manager stated that Staff C worked part time and did not live at the AFH.

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Review of the AFH's Employee Orientation Checklist showed that Staff C was hired by the AFH on 07/03/2023 as a caregiver. Staff C had a Nursing Assistant Registration license first issued on 12/29/2021 with an expiration date of 08/30/2026. Staff C had 75 hours of Basic training completed on 09/17/2025 and 54 hours of Core Basic training on 09/17/2025. Staff C worked for 807 days without obtaining a Home Care Aide Certification (HCA test).

In an interview on 05/12/2026 at 2:35 PM, Staff A stated that Staff C was waiting for their schedule for the HCA test. Department staff requested Staff C's HCA application document.

The AFH sent an email on 05/13/2026 stating that Staff C had not applied for their HCA test. In the email Staff A stated that Staff C had until September 2026 to obtain their HCA license.

On 05/14/2026 at 5:30 PM, department staff spoke to Staff A over the phone regarding the emergency rule regulation announcement on 08/08/2025. The emergency rule stated that the certification deadline was extended to 365 days from the date of hire for those who were currently on a 200-day timeline requirement. Informed Staff A that Staff C was hired 07/03/2023 and was not a current home care applicant when the emergency rule was announced on 08/08/2025. Staff A stated that Staff C was a part-time worker and that they were not aware of the HCA test timeline.

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, PARADISE HAVEN AFH is or will be in compliance with this law and / or regulation on (Date) 06/03/2026

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

Edralene C. [signature]
Provider (or Representative)

06/03/2026
Date

WAC 388-76-10420 Meals and snacks. The adult family home must:

(7) Ensure food is:

(b) Safe, sanitary, and uncontaminated.

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Review of the AFH's Employee Orientation Checklist showed that Staff C was hired by the AFH on 07/03/2023 as a caregiver. Staff C had a Nursing Assistant Registration license first issued on 12/29/2021 with an expiration date of 08/30/2026. Staff C had 75 hours of Basic training completed on 09/17/2025 and 54 hours of Core Basic training on 09/17/2025. Staff C worked for 807 days without obtaining a Home Care Aide Certification (HCA test).

In an interview on 05/12/2026 at 2:35 PM, Staff A stated that Staff C was waiting for their schedule for the HCA test. Department staff requested Staff C's HCA application document.

The AFH sent an email on 05/13/2026 stating that Staff C had not applied for their HCA test. In the email Staff A stated that Staff C had until September 2026 to obtain their HCA license.

On 05/14/2026 at 5:30 PM, department staff spoke to Staff A over the phone regarding the emergency rule regulation announcement on 08/08/2025. The emergency rule stated that the certification deadline was extended to 365 days from the date of hire for those who were currently on a 200-day timeline requirement. Informed Staff A that Staff C was hired 07/03/2023 and was not a current home care applicant when the emergency rule was announced on 08/08/2025. Staff A stated that Staff C was a part-time worker and that they were not aware of the HCA test timeline.

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, PARADISE HAVEN 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 388-76-10420 Meals and snacks. The adult family home must:

(7) Ensure food is:

(b) Safe, sanitary, and uncontaminated.

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

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure proper food handling was followed by 1 of 2 staff (Staff B, Caregiver) when they prepared sandwich for residents at home. This failure placed all current residents at risk for food borne illness.

Findings included…

Review of "Food Safety is Everybody's Business; Your Guide to Preventing Food Borne Illnesses" dated, May 2013 from Washington Department of Health, showed that single-use gloves may be used to prepare foods that need to be handled a lot, such as when making sandwiches, slicing vegetables, or arranging food on a platter. It is important to remember that gloves are used to protect the food from germs, not to protect your hands from the food. Gloves must be changed often to keep the food safe.

In an interview on 05/12/2026 at 10:49 AM, Staff A, Entity Representative/Resident Manager stated that Staff B worked full time and lived at the AFH.

Review of the AFH's Employee Orientation Checklist showed that Staff B was hired by the AFH on 04/01/2016 as a caregiver. Staff B completed the food safety continuing education on 12/11/2025.

Observation on 05/12/2026 at 11: 29 AM showed Staff B washed their hands with soap and water in the kitchen sink. Staff B with their bare hands removed two slices of bread from the bread bag. Staff B then spread peanut butter to one slice of the bread. Department staff informed Staff B to stop the procedure.

In an interview on 05/12/2026 at 11:32 AM, Staff C acknowledged that they should have worn gloves when they remove bread from the bag and when they spread peanut butter to the bread.

Observation on 05/12/2026 at 11:33 AM, showed Staff C donned gloves, picked up the 2 slices of bread, opened the cabinet and threw the bread in the trash. Staff C with the same gloves opened the bag of bread and was about to remove a slice of bread when department staff informed them to stop the task.

In an interview on 05/12/2026 at 11:34 AM, Staff C acknowledged that their gloves touched the cabinet and was contaminated. Staff C then removed their gloves and don new gloves.

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

Edralene C. Donia — Provider (or Representative)

06/03/2026 — Date

(1) For the purposes of this section "residency agreement" means a legally enforceable written document prepared by the adult family home that contains the rights and responsibilities of the facility and the resident specific to transfer and discharge and is signed by both parties.

(2) For residents with medicaid as a payor the facility must complete a signed written residency agreement with each resident that:

(a) Is signed by the resident or their legal representative and the facility upon admission of the resident to the facility;

(b) Requires the facility to agree to comply with the long-term care residents rights statute transfer and discharge requirements pursuant to RCW 70.129; and

(c) Requires the facility to provide notice to residents before transfer and discharge that includes information about available legal resources and notice that, subject to legislative appropriation, residents have the right to legal counsel at public expense upon notice of transfer or discharge.

(3) For residents whose payor status changes from medicaid to private pay, a new residency agreement is required if the resident's payor status returns to medicaid.

(4) A copy of the residency agreement that is signed and dated by both parties must be:

(a) Kept in the resident record; and

(b) Provided to the resident or their representative.

(5) The residency agreement must be in substantially the following form: Residency agreement residents with medicaid as a payor.

(a) [facility name] agrees to comply with the long-term care residents rights statute transfer and discharge requirements pursuant to RCW 70.129.

(b) Subject to legislative appropriation [resident name] has a right to a free lawyer to help them in response to a notice of transfer or discharge. If they want a free lawyer to help them, they must call the long-term care discharge defense screening line at [phone number].

(c) [Signature of resident/legal representative and date].

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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, PARADISE HAVEN AFH is or will be in compliance with this law and / or regulation on (Date)_____ .

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Provider (or Representative) Date

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(b) Subject to legislative appropriation [resident name] has a right to a free lawyer to help them in response to a notice of transfer or discharge. If they want a free lawyer to help them, they must call the long-term care discharge defense screening line at [phone number].

(c) [Signature of resident/legal representative and date].

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

(d) [Signature of facility and date].

WAC 388-76-10506 Written residency agreement—Residents with medicaid as a payor.

This requirement was not met as evidenced by:

Based on interview, and record review, the Adult Family Home (AFH) failed to have a signed residency agreement and keep the copy in resident record for 2 of 2 sampled residents (Resident 4 and Resident 5). This failure placed Resident 4 and Resident 5 at risk of not knowing their rights regarding transfer and discharge.

Findings included…

Observation on 05/12/2026 at 10:36 AM showed Staff B, Caregiver providing care and services to five residents (Residents 1, 2, 3, 4, and 5).

< Resident 4 >
Review of Resident 4's AFH records showed that the AFH admitted Resident 4 on [redacted]/2026. Resident 4 admission agreement, disclosure of services, and Medicaid policy were signed and dated [redacted]/2026. There was no Home and Community Based Settings (HCBS) resident agreement found in Resident 4's file.

< Resident 5 >
Review of Resident 5's AFH records showed that the AFH admitted Resident 5 on [redacted]/2022. Resident 5's admission agreement, disclosure of services, and Medicaid policy were signed and dated [redacted]/2022. There was no HCBS resident agreement found in Resident 5's file.

In an interview on 05/12/2026 at 10:50 AM, Staff A, Entity Representative/Resident Manager stated that all five residents have [redacted] payment source.

In an interview on 05/12/2026 at 12:41 PM, Staff A acknowledged that Resident 4 and Resident 5 did not have the HCBS resident agreement. In addition, Staff A stated all the AFH residents did not have the HCBS resident agreement.

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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, PARADISE HAVEN AFH is or will be in compliance with this law and / or regulation on (Date) 06/03/2026.

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

Edralene C. Donia — Provider (or Representative)

06/03/2026 — Date

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