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

Ioana Soloschi
7TH HEAVEN ELDER CARE
22916 88TH AVE W
EDMONDS, WA 98026

RE: 7TH HEAVEN ELDER CARE License # 751288

Dear Provider:

This letter addresses Compliance Determination(s) 39918 (Completion Date 04/17/2024) and 38073 (Completion Date 03/19/2024).

The Department completed a follow-up inspection of your Adult Family Home on 04/17/2024 and found that you have corrected the violations listed in the Full report dated 03/19/2024. Your home is back in compliance as of 04/10/2024 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 388-76-10895-2-a, WAC 388-76-10161-3

The Department staff who did the off-site verification:
Twyla Robinson, AFH Licensor

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

Sincerely,

Renee' Bourque

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

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 #: 751288	Compliance Determination # 38073
Plan of Correction	7TH HEAVEN ELDER CARE	Completion Date
Page 1 of 3	Licensee: Ioana Soloschi	03/19/2024

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 03/11/2024 and 03/11/2024 of:
7TH HEAVEN ELDER CARE
22916 88TH AVE W
EDMONDS, WA 98026

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:

Twyla Robinson, AFH Licensor

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

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.

Renae' Bourgua — Residential Care Services

03/26/2024 — 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.

Statement of Deficiencies	License #: 751288	Compliance Determination # 38073
Plan of Correction	7TH HEAVEN ELDER CARE	Completion Date
Page 2 of 3	Licensee: Ioana Soloschi	03/19/2024

Provider (or Representative) — Date: 4/3/2024

WAC 388-76-10895 Emergency evacuation drills Frequency and participation.

(2) The adult family home must conduct:

(a) Partial emergency evacuation drills which occur during random staffing shifts at least every sixty days, with each resident participating in at least one each calendar year;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to complete evacuation drills during random staffing shifts. This failure placed 3 of 3 residents (Resident 1, 2, and 3) at risk of harm in the event of a real emergency requiring evacuation by experienced staff.

Findings included...

Observation, on 03/11/2024 at 9:55 a.m., showed that 3 residents resided in the AFH.

In an interview, on 03/11/2024 at 12:24 p.m., Staff A (Provider) stated that Resident 1, 2, and 3 required assistance evacuating the home in case of an emergency.

Record review showed Staff C (Caregiver) was hired on 05/15/2018.

Record review showed that Staff C did not participate in the evacuation drills between 01/04/2020 to 03/01/2024.

In an interview, on 03/11/2024 at 2:15 p.m., when asked about the evacuation drills, Staff A stated that they rotated staff to include in the drills. When asked if Staff C was included, Staff stated "not in last year."

Attestation Statement

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, 7TH HEAVEN ELDER CARE is or will be in compliance with this law and / or regulation on (Date) 3/12/2024 .

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

Statement of Deficiencies	License #: 751288	Compliance Determination # 38073
Plan of Correction	7TH HEAVEN ELDER CARE	Completion Date
Page 3 of 3	Licensee: Ioana Soloschi	03/19/2024

Provider (or Representative) — Date: 4/3/2024

WAC 388-76-10161 Background checks Who is required to have.

(3) All household members over the age of eleven, volunteers, students, and noncaregiving staff who may have unsupervised access to residents must have a Washington state name and date of birth background check. They are not required to have a national fingerprint background check.

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH) failed to have a musician complete a Washington State Name and Date of Birth Background Check (BGC) within one business day of employment. This failure placed 3 of 3 residents (Resident 1, 2, and 3) at risk of exposure to persons with unknown backgrounds.

Findings included...

Observation, on 03/11/2024 at 9:55 a.m. through 2:23 p.m., showed 3 residents resided in the facility.

Record review of an email, dated 03/19/2024 at 4:51 p.m., showed the AFH employed a musician from 01/2023 to 06/2023.

In an interview, on 03/19/2024 at 11:52 a.m., when asked if a Name and Date of Birth BGC was completed, Staff A (Provider) stated "No. I did not. We stay with them the whole time."

Attestation Statement

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, 7TH HEAVEN ELDER CARE is or will be in compliance with this law and / or regulation on (Date) 4/10/2024.

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

Provider (or Representative) — Date: 4/3/2024

April, 02, 2024

Plan of Correction for 7th Heaven Elder Care

Regarding deficiencies find at the inspection on March, 11, 2024:

1. The deficiency for Fire drill with my on call employee was corrected on March 12th 2024 with a full evacuation .

2. The deficiency for background check will be corrected on April 10, 2024. The music therapist is out of town until April 9th.

7th Heaven Elder Care

Lic# 751288

Thank you for your help,

Provider

Ioana Soloschi