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

Angels of Joy LLC

Angels of Joy LLC
28849 38th Ave S
Auburn, WA 98001

RE: Angels of Joy LLC License # 755113

Dear Provider:

This letter addresses Compliance Determination(s) 83584 (Completion Date 09/11/2026) and 80723 (Completion Date 07/31/2026).

The Department completed a follow-up inspection of your Adult Family Home on 09/11/2026 and found that you have corrected the violations listed in the Complaint report dated 07/31/2026. Your home is back in compliance as of 08/31/2026 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 388-76-10198, WAC 388-76-10198-4, WAC 388-76-10360

The Department staff who did the on-site verification:
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

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

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Statement of Deficiencies	License #: 755113	Compliance Determination # 80723
Plan of Correction	Angels of Joy LLC	Completion Date
Page 1 of 4	Licensee: Angels of Joy LLC	07/31/2026

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 an unannounced on-site complaint investigation on 07/20/2026 and 07/30/2026 of:

Angels of Joy LLC
28849 38th Ave S
Auburn, WA 98001

This document references the following complaint number(s): 230827, 231213, 233824, 234484

The following sample was selected for review during the unannounced on-site visit: 3 of 6 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Vadim Panitkov, NCI

From:
DSHS, Home and Community Living 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: Angels of Joy LLC	07/31/2026

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 — 8-5-2026 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.

Provider (or Representative) — 8-12-2026 Date

WAC 388-76-10198 Adult family home Personnel records. The adult family home must keep documents related to staff in a place readily accessible to authorized department staff. These documents must be available during the staff's employment, and for at least two years following employment. The documents must include but are not limited to:

(4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) provider failed to have a name and date of birth background inquiry (BGI) for 1 of 6 current staff (Staff D, Caregiver) readily accessible to Department Staff (DS). This failure delayed the Department from determining if Staff D were qualified to care for all 6 residents in the AFH.

Findings included...

On 07/20/2026 at 9:29 AM, observation showed Residents 1, 2, 3, 4, 5, and 6 in the AFH with Staff B, Caregiver, and Staff C, Caregiver. Observation showed Residents 1, 2, 3, 4, 5, and 6 lived in and received care from the AFH. Staff A, Entity Representative/Resident Manager, arrived shortly after.

On 07/20/2026 at 10:06 AM, in an interview, Staff A stated that Staff D provided one-to-one care for Resident 1 on July 3rd, 2026.

On 07/20/2026 at 10:58 AM, in an interview, Staff A stated that Staff D started working at the AFH six days ago with their supervision. DS asked Staff A what Staff D's official

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start date was, Staff A stated that it was July 18th, 2026. DS reminded Staff A that in an earlier interview, Staff A stated that Staff D performed one-to-one supervision of Resident 1 on July 3rd, 2026. DS asked Staff A why the background check was not completed for Staff D when they started, Staff A stated that they lived at the facility and provided supervision of Staff D. DS asked Staff A if they supervised Staff A at all times, Staff A stated they did not but they were at the facility.

On 07/20/2026, a review of Staff D personnel records showed a BGI dated 07/20/2026.

On 07/20/2026 at 11:13 AM, in an interview, DS asked Staff A why Staff D's BGI check was dated for 07/20/2026. Staff A stated that they had just completed the background check.

On 07/29/2026, DS reviewed an email received from Background Check Central Unit (BCCU) records that showed Staff D had a BGI completed on 06/02/2025.

On 07/31/2026, DS reviewed an email received from the AFH dated 07/31/2026 that showed unnamed and undated orientation check list for Staff D. The check list showed that Staff D date of hire was 07/01/2026.

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, Angels of Joy LLC is or will be in compliance with this law and / or regulation on (Date) 8-31-2026

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

Provider (or Representative) — Date: 8-31-2026

WAC 388-76-10360 Negotiated care plan Timing of development Required. The adult family home must ensure the negotiated care plan is developed and completed within thirty days of the resident's admission.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to develop a Negotiated Care Plan (NCP) for 2 of 3 sampled residents' (Residents 1 and 2) within thirty days of their admission to the AFH. This placed Resident 1 and 2 at risk

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of unmet care needs and receiving services the residents did not negotiate.

Findings included...

On 07/20/2026 at 9:29 AM, observation showed Residents 1, 2, 3, 4, 5, and 6 in the AFH with Staff B, Caregiver, and Staff C, Caregiver. Observation showed Residents 1, 2, 3, 4, 5, and 6 lived in and received care from the AFH. Staff A, Entity Representative/Resident Manager, arrived shortly after.

On 07/20/2026 a review of Resident 1's "Resident Information Sheet" dated for 07/20/2026 showed that Resident 1 was admitted to the AFH on [redacted]/2026. Review of Resident 1's records showed that Resident 1 had no NCP developed and completed within 30 days of admission date.

On 07/20/2026 a review of Resident 2's "Resident Information Sheet" dated for 07/20/2026 showed that Resident 2 was admitted to the AFH on [redacted]/2026. Review of Resident 2's records showed that Resident 2 had no NCP developed and completed within 30 days of admission date.

On 07/20/2026 at 10:52 AM, in an interview, Department Staff (DS) asked Staff A where Resident 1's and Resident 2's NCP were, Staff A stated that they were not complete. DS asked Staff A why Resident 1's and Resident 2's NCP were not completed within 30 days of admission, Staff A stated that they were lax and had not completed the NCP. DS asked Staff A how soon the NCP were needed to be completed for new residents, Staff A stated within 30 days of their admission date. Staff A stated that they were going to fix the NCP's and make sure it is done promptly in the future.

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, Angels of Joy LLC is or will be in compliance with this law and / or regulation on (Date) 8-31-2026

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

Provider (or Representative) — Date: 8-31-2026

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