



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

From The Heart AFH Inc
From The Heart AFH Inc
4408 Artesia Dr
Pasco, WA 99301

RE: From The Heart AFH Inc License # 752703

Dear Provider:

This letter addresses Compliance Determination(s) 56268 (Completion Date 03/13/2025) and 52299 (Completion Date 01/15/2025).

The Department completed a follow-up inspection of your Adult Family Home on 03/13/2025 and found that you have corrected the violations listed in the Follow up report dated 01/15/2025. Your home is back in compliance as of 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

The Department staff who did the off-site verification:
Sarah Clark, Community Complaint Investigator

If you have any questions, please contact me at (509)572-7394.

Sincerely,

Michelle Ann Yarbrough

Michelle Yarbrough, Adult Family Home Field Manager
Region 1, Unit C
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
1200 Alder Street, Union Gap, WA 98903

Statement of Deficiencies	License #: 752703	Compliance Determination # 52299
Plan of Correction	From The Heart AFH Inc	Completion Date
Page 1 of 3	Licensee: From The Heart AFH Inc	01/15/2025

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 an unannounced on-site follow-up on 12/30/2024 and 12/30/2024 of:

From The Heart AFH Inc
4411 Segovia Dr
Pasco, WA 99301

This document references the following SOD dated: 01/15/2025

The following sample was selected for review during the unannounced on-site visit: 4 of 4 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Sarah Clark, Community Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit C
1200 Alder Street
Union Gap, WA 98903

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.

Selena Clemons

Residential Care Services

01/22/2025

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.

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

Statement of Deficiencies	License #: 752703	Compliance Determination # 52299
Plan of Correction	From The Heart AFH Inc	Completion Date
Page 2 of 3	Licensee: From The Heart AFH Inc	01/15/2025

Penay Usher
Provider (or Representative)

1/23/25
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 obtain a Medical Test Site Waiver (MTSW) before completing blood glucose testing for 1 of 4 residents (Resident 1). This failure resulted in the AFH performing blood glucose testing for one resident without oversight and placed the resident at risk of receiving inaccurate test results.

Findings included . . .

Review of the Dear Provider Letter dated 04/01/2022 "Medical Test Site Waiver Regulatory Requirements" showed a MTSW was required to perform medical tests, interpret the results, or act upon the test results in the AFH per state and federal regulations.

Review of Washington's Department of Health MTSW facility search on 10/16/2024 and 10/30/2024 showed the AFH had no MTSW certification granted or pending.

On 10/16/2024 at 11:26 AM, Staff A, Executive Director, stated they had filled out the MTSW application and sent it to their corporate office in March 2024 and again in July 2024. They had not followed up to see if the application had been submitted or processed.

During an interview on 12/30/2024 at 11:29 AM, Staff B, Caregiver, stated delegated staff perform blood glucose testing on Resident 1.

Observation on 12/30/2024 at 11:42 AM, showed Staff C, Caregiver, performing blood glucose testing on Resident 1.

On 01/13/2025 at 10:32 AM, Staff A stated they had contacted their corporate office to arrange payment for the MTSW application.

Provider (or Representative)

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 obtain a Medical Test Site Waiver (MTSW) before completing blood glucose testing for 1 of 4 residents (Resident 1). This failure resulted in the AFH performing blood glucose testing for one resident without oversight and placed the resident at risk of receiving inaccurate test results.

Findings included . . .

Review of the Dear Provider Letter dated 04/01/2022 "Medical Test Site Waiver Regulatory Requirements" showed a MTSW was required to perform medical tests, interpret the results, or act upon the test results in the AFH per state and federal regulations.

Review of Washington's Department of Health MTSW facility search on 10/16/2024 and 10/30/2024 showed the AFH had no MTSW certification granted or pending.

On 10/16/2024 at 11:26 AM, Staff A, Executive Director, stated they had filled out the MTSW application and sent it to their corporate office in March 2024 and again in July 2024. They had not followed up to see if the application had been submitted or processed.

During an interview on 12/30/2024 at 11:29 AM, Staff B, Caregiver, stated delegated staff perform blood glucose testing on Resident 1.

Observation on 12/30/2024 at 11:42 AM, showed Staff C, Caregiver, performing blood glucose testing on Resident 1.

On 01/13/2025 at 10:32 AM, Staff A stated they had contacted their corporate office to arrange payment for the MTSW application.

Statement of Deficiencies	License #: 752703	Compliance Determination # 52299
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Review of Washington's Department of Health MTSW facility search on 01/15/2025 showed the AFH had no MTSW certification granted or pending.

This is an uncorrected deficiency previously cited on 10/31/2024.

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, From The Heart AFH Inc is or will be in compliance with this law and / or regulation on (Date) 2/10/25.

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

Jenay Usher
Provider (or Representative)

1/23/25
Date

Review of Washington's Department of Health MTSW facility search on 01/15/2025 showed the AFH had no MTSW certification granted or pending.

This is an uncorrected deficiency previously cited on 10/31/2024.

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, From The Heart AFH Inc 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



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

Statement of Deficiencies	License #: 752703	Compliance Determination # 48796
Plan of Correction	From The Heart AFH Inc	Completion Date
Page 1 of 3	Licensee: From The Heart AFH Inc	10/31/2024

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 an unannounced on-site complaint investigation on 10/16/2024 and 10/16/2024 of:

From The Heart AFH Inc
4411 Segovia Dr
Pasco, WA 99301

This document references the following complaint number(s): 151201

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 investigated the Adult Family Home:

Sarah Clark, Community Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit C
1200 Alder Street
Union Gap, WA 98903

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.

Selena Clemons

Residential Care Services

11/01/2024

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.

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

Statement of Deficiencies	License #: 752703	Compliance Determination # 48796
Plan of Correction	From The Heart AFH Inc	Completion Date
Page 2 of 3	Licensee: From The Heart AFH Inc	10/31/2024

Jenny H. Hether
Provider (or Representative)

11/7/2024
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 record review and interview, the Adult Family Home (AFH) failed to obtain a Medical Test Site Waiver (MTSW) before completing COVID-19 tests for 6 of 6 residents (Residents 1, 2, 3, 4, 5, & 6). This failure placed the residents at risk of not receiving safe care against communicable diseases per compliance standards.

Findings included . . .

Review of the Dear Provider Letter dated 04/01/2022 "Medical Test Site Waiver Regulatory Requirements" showed a MTSW was required to perform medical tests, interpret the results, or act upon the test results in the AFH per state and federal regulations.

Review of Washington's Department of Health MTSW facility search on 10/16/2024 and 10/30/2024 showed the AFH had no MTSW certification granted or pending.

On 10/16/2024 at 11:26 AM, Staff A, Executive Director, stated they had filled out the MTSW application and sent it to their corporate office in March 2024 and again in July 2024. They had not followed up to see if the application had been submitted or processed.

During an interview on 10/29/2024 at 9:22 AM, Staff A stated the home had antigen test kits for COVID-19. Residents would do their own the testing, and staff would read the test results for evaluation of symptoms or risk of infection in the AFH.

On 10/31/2024 at 10:35AM, Staff A stated during the COVID-19 outbreak, all residents had been tested.

Attestation Statement

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

Provider (or Representative)

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 record review and interview, the Adult Family Home (AFH) failed to obtain a Medical Test Site Waiver (MTSW) before completing COVID-19 tests for 6 of 6 residents (Residents 1, 2, 3, 4, 5, & 6). This failure placed the residents at risk of not receiving safe care against communicable diseases per compliance standards.

Findings included . . .

Review of the Dear Provider Letter dated 04/01/2022 "Medical Test Site Waiver Regulatory Requirements" showed a MTSW was required to perform medical tests, interpret the results, or act upon the test results in the AFH per state and federal regulations.

Review of Washington's Department of Health MTSW facility search on 10/16/2024 and 10/30/2024 showed the AFH had no MTSW certification granted or pending.

On 10/16/2024 at 11:26 AM, Staff A, Executive Director, stated they had filled out the MTSW application and sent it to their corporate office in March 2024 and again in July 2024. They had not followed up to see if the application had been submitted or processed.

During an interview on 10/29/2024 at 9:22 AM, Staff A stated the home had antigen test kits for COVID-19. Residents would do their own the testing, and staff would read the test results for evaluation of symptoms or risk of infection in the AFH.

On 10/31/2024 at 10:35AM, Staff A stated during the COVID-19 outbreak, all residents had been tested.

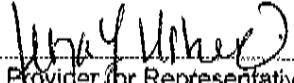
Attestation Statement

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Statement of Deficiencies	License #: 752703	Compliance Determination # 48796
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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, From The Heart AFH Inc is or will be in compliance with this law and / or regulation on (Date) 12/9/24.

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



Provider (or Representative)

11/7/2024

Date

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, From The Heart AFH Inc 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