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) 59631 (Completion Date 05/21/2025) and 57492 (Completion Date 04/17/2025).

The Department completed a follow-up inspection of your Adult Family Home on 05/21/2025 and found that you have corrected the violations listed in the Complaint report dated 04/17/2025. Your home is back in compliance as of 05/01/2025 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 388-76-10673-1-a

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

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

Sincerely,

Michelle Yarbrough, Adult Family Home Field Manager
Region 1, Unit C
Residential Care Services

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
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1200 Alder Street, Union Gap, WA 98903

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 03/19/2025 and 04/04/2025 of:

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

This document references the following complaint number(s): 173463

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
Michelle Yarbrough, Adult Family Home Field Manager

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.

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

WAC 388-76-10673 Abuse and neglect reporting Mandated reporting to department Required.

(1) In accordance with chapter 74.34 RCW, all providers, entity representatives, resident managers, owners, caregivers, staff, and students that provide care and services to residents, are mandated reporters and must immediately report to the department when there is:

(a) A reasonable cause to believe that abandonment, abuse, exploitation, financial exploitation, or neglect of a vulnerable adult has occurred; or

This requirement was not met as evidenced by:

Based on interview and record review, Adult Family Home (AFH) staff failed to immediately make a mandated report, to the Department, for an incident of verbal abuse for 1 of 1 resident (Resident 1). This failure placed all residents at risk of abuse not being investigated by the Department.

Findings included…

Review of an undated, Adult Family Home policy, titled “Prevention of Abuse Policy” specified in accordance with RCW 74.34, the entity representative, or provider of this facility and caregivers, staff and any person providing cares and services are mandated reporters and must immediately report to the department when there is a reasonable cause to believe that abandonment, abuse, exploitation, financial exploitation, or neglect of a vulnerable has occurred.

On 04/10/2025, review of Secure Tracking and Reporting System (STARS) showed the AFH reported that there was an incident of alleged verbal abuse involving Resident 1 and Staff C, Caregiver, on 02/13/2025. The report was received by the Department on

02/25/2025 (13 days after the incident.)

Review of the AFH staff orientation checklist, for Staff B, Caregiver, dated 07/24/2024, on page 3 section 6 titled Resident Rights under letter (e) showed “staff’s duty to report any suspected abuse, abandonment, neglect, or exploitation of a resident (mandated reporting.)

Review of a statement, handwritten and signed by Resident 1, dated 02/19/2025, indicated Resident 1 was having a mental crisis on 02/13/2025. Resident 1 wrote that Staff C came into the home, and Staff C stated they were going to stab Resident 1 in the heart with a butcher knife. Resident 1 also wrote they were in fear for their life.

During an interview on 03/19/2025 at 11:32 AM, Staff A, Resident Care Coordinator (RCC), stated they were made aware of the incident only after speaking to Resident 1 on 02/19/2025. Staff A asked Staff B why Staff B did not report Resident 1’s allegation sooner. Staff B told Staff A they did not report the allegation because Staff B believed Staff A and Staff C were friends.

On 03/19/2025 at 1:20 PM, Resident 1 stated they were having a “mental health crisis” on 02/13/2025. Resident 1 reported that while they were on the phone with Staff B, Staff C entered the home, yelled at Resident 1, and threatened to stab Resident 1.

During an interview on 03/19/2025 at 01:28 PM, Staff B stated they were not at work when they received a call from the staff on shift reporting that Resident 1 was having a mental crisis. Staff B called Staff C, who was working that day, to see if Staff C could assist in de-escalating Resident 1. Staff B stated they were on the phone with Resident 1 when they overheard Staff C enter the home and begin yelling, cussing, and threatening Resident 1. Staff B stated they did not report the incident to the AFH management as Staff C scared them and they believed Staff C was “friends” with management staff. Staff B stated they knew what a mandated reporter was.

During an interview on 04/10/2025 at 1:29 PM, Staff D, Executive Director, stated they were made aware of the incident, by Staff A, on 02/19/2025, six days after the incident occurred. Staff D stated Staff C worked for a total of three days, with vulnerable adults, before Staff C was removed from the workplace.

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