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) 68283 (Completion Date 11/10/2025) and 64093 (Completion Date 09/08/2025).

The Department completed a follow-up inspection of your Adult Family Home on 11/10/2025 and found that you have corrected the violations listed in the Complaint report dated 09/08/2025. Your home is back in compliance as of 10/23/2025 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 388-76-10475-3-a, WAC 388-76-10616-2-b

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 Ann Yarbrough

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

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

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 08/13/2025 of:

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

This document references the following complaint number(s): 189347, 189803

The following sample was selected for review during the unannounced on-site visit: 1 of 5 current residents and 1 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

Statement of Deficiencies	License #: 752703	Compliance Determination # 64093
Plan of Correction	From The Heart AFH Inc	Completion Date
Page 2 of 6	Licensee: From The Heart AFH Inc	09/08/2025

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.

Michelle Ann Garbrough
Residential Care Services

09/11/2025
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.

Provider (or Representative)

9/11/25
Date

WAC 388-76-10475 Medication Log. The adult family home must:

(3) Ensure the medication log includes:

(a) Initials of the staff who assisted or gave each resident medication(s);

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure the medication log was signed by staff giving residents medication for 1 discharged resident and 1 of 5 current residents (Residents 1 & 2). This failure resulted in undocumented medication receipt and placed all residents at risk for potential medication errors.

Findings included...

Resident 1

Review of Resident 1's Adult Family Home Admissions Contract, under the section titled: Medication Assistance, shows that a medication sheet is kept for each resident. The caregivers sign each medication out as he/she is dispensing them.

Review of Resident 1's Department Assessment dated 07/02/2025, showed Resident 1 required assistance with medications due Resident 1's inability to open containers, psychotropic medications needed to be monitored, forgets to take medication, unable to see/read labels, unaware of dosages, and memory loss.

Review of Resident 1's Negotiated Care Plan (NCP) dated 07/24/2025, showed Resident

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Review of Resident 1's Department Assessment dated 07/02/2025, showed Resident 1 required assistance with medications due Resident 1's inability to open containers, psychotropic medications needed to be monitored, forgets to take medication, unable to see/read labels, unaware of dosages, and memory loss.

Review of Resident 1's Negotiated Care Plan (NCP) dated 07/24/2025, showed Resident

1 was admitted to the AFH on [redacted]/2025. The NCP indicated Resident 1 needed medication assistance and did not self-administer any medications. Staff were to keep all medications always locked up and given as needed or scheduled.

Review of Resident 1's physician orders, printed on 08/15/2025, with different medication start dates showed Resident 1 was ordered to receive:

-Acetaminophen-codeine (pain) 300-30 milligrams (mgs) twice a day.
-Atorvastatin (cholesterol) 20mg every day at bedtime.
-Baclofen (muscle spasms) 10mg twice a day.
-Calcium Acetate (phosphate binder) 667mg – 1capsule twice a day at 7:30 AM and 4:30 PM and 2 capsules at 11:30 AM.
-Gabapentin (nerve pain) 100mg twice a day.
-Senna (constipation) 8.5mg twice a day. Hold for loose stools.

Review of Resident 1's August 2025 electronic Medical Record (eMAR) showed missing documentation for 14 scheduled medication doses, instead of caregiver initials there was a dash (-) in the eMAR box. The following scheduled medications were not documented as given or not given:

-Acetaminophen-codeine on 08/05/2025, 1 dose.
-Atorvastatin on 08/03/2025 and 08/05/2025, 2 doses.
-Baclofen on 08/05/2025 both AM and PM, 2 doses.
-Calcium Acetate on 08/02/2025 both 11:30 AM and 4:30 PM, 2 doses.
-Gabapentin on 08/02/2025 and 08/03/2025, 1 dose.
-Losartan Potassium (treats high blood pressure, heart failure and kidney problems caused by diabetes) on 08/02/2025 and 08/05/2025, 2 doses.
-Senna on 08/02/2025, 08/03/2025, 08/05/2025 both AM and PM, 6 doses.

Resident 2

Review of Resident 2's Department Assessment dated 09/11/2024, showed Resident 2 required medication assistance due to a complex regimen, ability fluctuates, psychotropic drug monitoring, and forgets to take medications. Caregiver instructions included document medication taken.

Review of Resident 2's NCP dated 01/25/2025, showed Resident 2 admitted to the AFH on [redacted]/2022 and they were unable to do any self-medications and medications must be administered. NCP further showed caregiver will administer medication as Primary Care Physician ordered, scheduled or as needed.

Review of Resident 2's physician orders, printed on 08/15/2025, with different medication start dates showed Resident 2 was ordered to receive: -Baclofen (muscle relaxer) 20 milligrams (mg) four times a day.

-Floranex (probiotic) 1 million cells per capsule, 1 tablet three times a day.
-Magnesium (Mineral supplement) 200mg twice a day.

Review of Resident 2's August 2025 (eMAR) showed missing documentation for 10 scheduled medication doses, instead of caregiver initials there was a dash in the eMAR box. The following scheduled medications were not documented as given or not given:

-Baclofen on 08/02/2025 at 5:00PM and 8:00 PM and 08/03/2025 at 8:00 PM, 3 doses.
-Floranex on 08/02/2025 and 08/03/2025 at 8:00PM; 08/05/2025 at 9:00 AM and 2:00PM; 08/09/2025 at 9:00 AM and 9:00 PM, 6 doses.
-Magnesium on 08/02/2025, 1 dose.

During an interview on 09/08/2025 at 11:02 AM, Staff C, Resident Care Coordinator, stated their eMAR system will notify staff an hour prior to when a medication is due and turn the medication box red when the medication is passed due. Staff C also stated it is the staff's responsibility to sign off on resident medications and was not aware of what the dash in the eMAR boxes indicated.

This deficiency was previously cited on 09/09/2024.

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) 10/23/25.

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

Provider (or Representative) — Date 9/11/25

WAC 388-76-10616 Resident rights Transfer and discharge notice.

(2) The home may make the notice as soon as practicable before transfer or discharge when:

(b) An immediate transfer or discharge is required by the resident's urgent medical needs; or

-Floranex (probiotic) 1 million cells per capsule, 1 tablet three times a day.
-Magnesium (Mineral supplement) 200mg twice a day.

Review of Resident 2's August 2025 (eMAR) showed missing documentation for 10 scheduled medication doses, instead of caregiver initials there was a dash in the eMAR box. The following scheduled medications were not documented as given or not given:

-Baclofen on 08/02/2025 at 5:00PM and 8:00 PM and 08/03/2025 at 8:00 PM, 3 doses.
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-Magnesium on 08/02/2025, 1 dose.

During an interview on 09/08/2025 at 11:02 AM, Staff C, Resident Care Coordinator, stated their eMAR system will notify staff an hour prior to when a medication is due and turn the medication box red when the medication is passed due. Staff C also stated it is the staff's responsibility to sign off on resident medications and was not aware of what the dash in the eMAR boxes indicated.

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(2) The home may make the notice as soon as practicable before transfer or discharge when:

(b) An immediate transfer or discharge is required by the resident's urgent medical needs; or

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to provide a written 30-day discharge notice to 1 former resident (Resident 1). This failure placed the resident at risk for prolonged hospitalization and a disorderly discharge from the home.

Findings Included...

Record review of Resident 1's progress notes, showed on [redacted]/2025 at approximately 12:10 PM Resident 1 was sent to a local hospital for evaluation and treatment.

Review of Resident 1's progress notes showed Staff B, Nurse Delegator, wrote an entry 08/06/2025 at 10:23 AM, that Staff B spoke with Collateral Contact 1, Resident Representative (CC1) and CC1 was aware the AFH would not be accepting Resident 1 back due to behaviors.

Review of Resident 1's progress note entry by Staff B on 08/06/2025 at 11:16 AM showed CC1 called Staff B and wanted Resident 1 to be sent back to the AFH. Staff B wrote they explained to CC1 and the hospital discharge planner the AFH would not be taking Resident 1 back due to their behaviors.

Interview on 08/13/2025 at 12:11 PM, Staff A, Administrator, stated Resident 1 was not given a 30-day notice of discharge after Staff A would not accept them back to the AFH from the hospital. Staff A stated they were not going to issue Resident 1 a 30-day notice of discharge.

Interview on 09/02/2025 at 02:18 PM, Staff B, Nurse Delegator, stated they had been told by Staff A that Resident 1 would not be returning to the Adult Family Home (AFH). Staff B also stated they spoke with CC1 and told CC1the AFH would not be accepting Resident 1 back. Staff B did not do go to the hospital and perform a re-assessment on Resident 1.

Interview on 08/20/2025 at 11:10 AM, CC1 stated they were told by Staff A and Staff B that Resident 1 would not be accepted back into the AFH. They stated they did not receive a 30-day notice of discharge from the provider. CC1 stated Resident 1 had no other place to go and they did not know what they were going to do.

On 08/13/2025 review of Resident 1's records showed there was no 30-day written notice of discharge available for review.

Statement of Deficiencies	License #: 752703	Compliance Determination # 84093
Plan of Correction	From The Heart AFH Inc	Completion Date
Page 6 of 6	Licensee: From The Heart AFH Inc	09/08/2025

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