



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

12/05/2024

Anointed Care AFH LLC
Anointed Care AFH LLC
2922 14th PL SE
Auburn, WA 98092

RE: Anointed Care AFH LLC # 753436

Dear Provider:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 51238 (Completion Date 12/05/2024) and 49211 (Completion Date 10/23/2024).

The Department completed a follow-up inspection of your Adult Family Home on 12/05/2024 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 246-980-030 Can a nonexempt long-term care worker work before obtaining certification as a home care aide?

(2) The long-term care worker may not work for more than two hundred calendar days from their date of hire without obtaining certification.

WAC 388-76-10146 Qualifications Training and home care aide certification.

(3) All persons listed in subsection (2) of this section, must obtain the home-care aide certification if required by this section or chapters 246-980 or 388-112A WAC.

WAC 388-112A-0105 Who is required to obtain home care aide certification and by when?

(1) All long-term care workers must obtain home care aide certification as provided in chapter 246-980 WAC.

The Department staff who did the On Site verification:
Olga Petrov, NCI

If you have any questions, please contact me at (253)234-6007.

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

Sincerely,

A handwritten signature in dark ink, appearing to read 'Lydia', with a long horizontal stroke extending to the right.

Lydia Owusu-Acheampong, Field Manager
Region 2, Unit G
Residential Care Services



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Statement of Deficiencies	License #: 753436	Compliance Determination # 49211
Plan of Correction	Anointed Care AFH LLC	Completion Date
Page 1 of 3	Licensee: Anointed Care AFH LLC	10/23/2024

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 10/21/2024 and 10/21/2024 of:

Anointed Care AFH LLC
2922 14th PL SE
Auburn, WA 98092

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 inspected the Adult Family Home:

Olga Petrov, NCI

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2, Unit G
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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

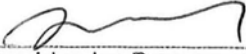
10-30-2024

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 #: 753436	Compliance Determination # 49211
Plan of Correction	Anointed Care AFH LLC	Completion Date
Page 2 of 3	Licensee: Anointed Care AFH LLC	10/23/2024


Provider (or Representative)

11/06/2024
Date

WAC 246-980-030 Can a nonexempt long-term care worker work before obtaining certification as a home care aide?

(2) The long-term care worker may not work for more than two hundred calendar days from their date of hire without obtaining certification.

WAC 388-76-10146 Qualifications Training and home care aide certification.

(3) All persons listed in subsection (2) of this section, must obtain the home-care aide certification if required by this section or chapters 246-980 or 388-112A WAC.

WAC 388-112A-0105 Who is required to obtain home care aide certification and by when?

(1) All long-term care workers must obtain home care aide certification as provided in chapter 246-980 WAC.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 2 sampled staff (Staff B, Caregiver) got Home Care Aide (HCA) certification within two hundred calendar days of the date of hire. This failure placed all residents at risk of unmet needs from an unqualified caregiver.

Findings included...

WAC 246-980-040(3) states, "To qualify for certification as a home care aide, the applicant shall: Become certified within 200 days of date of hire, or 260 days if granted a provisional certificate under RCW 18.88B.041."

Observation on 10/21/2024 at 9:05 AM showed Staff B provided care and services to six residents (Residents 1, 2, 3, 4, 5 and 6) present in the home.

On 10/21/2024 at 9:05 AM, Staff B phoned someone, and fifteen minutes later, Staff A, Entity Representative arrived.

Record review on 10/21/2024 at 10:35 AM, showed Staff B, initially hired on 03/16/2024, had a current Nursing Assistant Registered (NAR) credential. The caregiver completed the basic 75 hours training on 01/29/2024, and did not have an HCA certification.

In interview on 10/21/2024 at 10:35 AM, Staff A stated that Staff B was live-in caregiver

Statement of Deficiencies	License #: 753436	Compliance Determination # 49211
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and worked day shifts Monday to Thursday. Staff A stated that Staff B was not able to schedule their certification testing exams due to the back log of the testing site.

Review of the Department database showed that there was not a backlog for the HCA certification process. According to "Dear Provider Letter" (Department's letters to Providers with policies updates), dated 10/13/2023 stated that the long-term care worker (LTCW) training and certification requirements were extended during the COVID-19 (mild to moderate respiratory illness) public health emergency. The letter said for LTCW hired beginning 02/01/2024, they must meet standard training requirement within 120 days of hire and standard certification requirement within 200 days of hire.

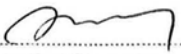
Staff B had continued to work at the AFH without HCA certification after 200 days of hire (10/02/2024).

On 10/23/2024, the Department requested a received a written staffing plan from AFH.

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, Anointed Care AFH LLC is or will be in compliance with this law and / or regulation on (Date) 11/06/2024

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


Provider (or Representative)

11/06/2024
Date



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Anointed Care AFH LLC
Anointed Care AFH LLC
2922 14th PL SE
Auburn, WA 98092

RE: Anointed Care AFH LLC # 753436

Dear Provider:

The Department completed a full inspection of your Adult Family Home on 10/23/2024 and found that your home does not meet the Adult Family Home Licensing requirements.

The Department:

- Wrote the enclosed report; and
- May take licensing enforcement action based on many deficiency listed on the enclosed report; and
- May inspect the home to determine if you have corrected all deficiencies; and
- Expects all deficiencies to be corrected within the timeframe accepted by the department.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately;
- Contact the Field Manager for clarifications related to the Statement of Deficiencies (SOD);
- Within 10 calendar days after you receive this letter, complete and return the enclosed 'Plan/Attestation Statement';
 - o Sign and date the enclosed report;
 - o For each deficiency, indicate the date you have or will correct each deficiency;
 - o Mail the Plan/Attestation Statement and report with original signatures to:

Lydia Owusu-Acheampong, Field Manager
Residential Care Services
Region 2, Unit G
20425 72nd Avenue S, Suite 400

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10/23/2024

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Kent, WA 98032

- Complete correction(s) within 45 days, or sooner if directed by the Department, after review of your proposed correction dates.
- Have your plan approved by the Department.

Consultation(s):

In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

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.

The Adult Family Home failed to ensure that Staff C, Resident Manager had a fingerprint background result readily available for department staff's review. The AFH obtained and provided the copy of Staff C's fingerprint background result on 10/23/2024 (two days after the inspection).

You Are Not:

- Required to submit a plan of correction for the consultation deficiency or deficiencies stated in this letter and not listed on the enclosed report.

You May:

- Ask for a informal dispute resolution meeting, according to the attached 'Informal Dispute Resolution' instructions; and
- Ask questions and provide written information to help clarify or dispute the deficiencies.
- Contact me for clarification of the deficiency or deficiencies found.

If You Have Any Questions:

- Please contact me at (253)234-6007.

Sincerely,

Lydia Owusu-Acheampong, Field Manager
Region 2, Unit G
Residential Care Services

Enclosure

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

**Plan
(Plan of Correction)**

You Must:

Return the plan, on the enclosed report, within 10 calendar days after you receive this letter.

Include the following in your plan for each deficiency:

- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency.

Send your plan to:

Lydia Owusu-Acheampong, Field Manager
Residential Care Services
Region 2, Unit G
20425 72nd Avenue S, Suite 400
Kent, WA 98032

INFORMAL DISPUTE RESOLUTION [RCW 70.128]

You May:

Request an Informal Dispute Resolution (IDR) meeting within 10 working days after the date you receive this letter. You **must** use an '**IDR Request Form**' for **each** citation or enforcement you plan to dispute. You can find this form and directions on the IDR Adult Family Home web page at: <https://www.dshs.wa.gov/altsa/idr>

Provider Process for Choosing a Panel or Traditional IDR:

You may only choose a **Panel IDR** if you are disputing **three or fewer** citations or enforcement actions. You may choose a **Traditional IDR** regardless of the number of citations or enforcement actions you intend to dispute. If you choose a **Panel IDR**, all documents supporting your dispute must be submitted within **20 working days** after the date you receive this letter. For **Panel IDRs** the program will not consider any documents submitted after the **20 working day deadline**. For **Traditional IDRs** you should submit documents supporting your dispute at least **seven** days prior to the date of the IDR meeting.

Send your request and supporting documents to the address below or email to rcsidr@dshs.wa.gov:

Adult Family Home IDR Program
Residential Care Services
PO Box 45600

Anointed Care AFH LLC # 753436

10/23/2024

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Olympia, WA 98504-5600

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