



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 License # 753436

Dear Provider:

This letter addresses Compliance Determination(s) 54173 (Completion Date 02/06/2025) and 50481 (Completion Date 11/25/2024).

The Department completed a follow-up inspection of your Adult Family Home on 02/06/2025 and found that you have corrected the violations listed in the Complaint report dated 11/25/2024. Your home is back in compliance as of 11/19/2024 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 388-76-10025-1, WAC 388-76-10025-2, WAC 388-76-10025-3

The Department staff who did the on-site verification:
Ivy Mordo, Nursing Consultant Institutional

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

Sincerely,

Dahl Kim

Dahl Kim, Field Manager
Region 2, Unit G
Residential Care Services



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Statement of Deficiencies	License #: 753436	Compliance Determination # 50481
Plan of Correction	Anointed Care AFH LLC	Completion Date
Page 1 of 3	Licensee: Anointed Care AFH LLC	11/25/2024

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 11/20/2024 and 11/20/2024 of:

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

This document references the following complaint number(s): 153640

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:

Ivy Mordo, Nursing Consultant Institutional

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

11/26/2024
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.



Provider (or Representative)

11/29/2024

Date

WAC 388-76-10025 License annual fee.

- (1) The adult family home must pay the license fee that is established in the state's operating budget, as described in RCW 70.128.060 .
- (2) Each year, the home's annual license fee is due during the same month in which the home was initially licensed. For example, if the home was licensed in June, 2010, then the annual licensing fee will be due in June of each year.
- (3) The home must ensure that the department receives the annual license fee when it is due.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to pay their annual license fee when it was due. This failure resulted in the AFH operating without a valid license since 09/15/2024, and placed 6 of 6 residents (Residents 1, 2, 3, and 4) at risk of losing their home.

Findings included...

A review of Department records using Secure Tracking and Reporting Systems on 11/20/2024, showed the annual license fee for AFH was due on 09/15/2024 and it had not been paid.

In an unannounced visit on 11/20/2024 at 11:00 AM, observed four residents (Residents 1, 2, 3, 4, 5, and 6) resided and received care in the AFH.

In an interview with Staff A, Entity Representative, on 11/20/2024 at 11:30 AM, they stated that, they forgot to pay the license fee.

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) 11/29/2024

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

Statement of Deficiencies

License #: 753436

Compliance Determination # 50481

Plan of Correction

Anointed Care AFH LLC

Completion Date

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Licensee: Anointed Care AFH LLC

11/25/2024



Provider (or Representative)

11/29/2024

Date