



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

At Highly Favored One AFH LLC
At Highly Favored One Adult Family Home LLC
1307 S Center Dr
Spokane Valley, WA 99212

RE: At Highly Favored One Adult Family Home LLC License # 753904

Dear Provider:

This letter addresses Compliance Determination(s) 36336 (Completion Date 02/05/2024) and 34232 (Completion Date 01/02/2024).

The Department completed a follow-up inspection of your Adult Family Home on 02/05/2024 and found that you have corrected the violations listed in the Full report dated 01/02/2024. Your home is back in compliance as of 01/24/2024 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 388-76-10310-1

The Department staff who did the on-site verification:
Valorie Bradley, AFH/ALF Licenser

If you have any questions, please contact me at (509)323-7321.

Sincerely,

Tamara Tredo

Tamara Tredo, Field Manager
Region 1, Unit E
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
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

Statement of Deficiencies	License #: 753904	Compliance Determination #34232
Plan of Correction	At Highly Favored One Adult Family Home LLC	Completion Date
Page 1 of 2	Licensee: At Highly Favored One AFH LLC	01/02/2024

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 12/20/2023 and 12/20/2023 of:

At Highly Favored One Adult Family Home LLC
1307 S Center Dr
Spokane Valley, WA 99212

The following sample was selected for review during the unannounced on-site visit: 5 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Valorie Bradley, AFH/ALF Licensors

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1, Unit E
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

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.

Tamara Tredo

Residential Care Services

01/10/2024

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 # 753904	Compliance Determination #34232
Plan of Correction	At Highly Favored One Adult Family Home LLC	Completion Date
Page 2 of 2	Licensee: At Highly Favored One AFH LLC	01/02/2024

JOSEPH RWARA KAMAU
Provider (or Representative)

01/24/2024
Date

WAC 358-76-10310 Tuberculosis Test records. The adult family home must:

(1) Keep the records of tuberculin test results, reports of X-ray findings, and any physician or public health provider orders in the adult family home;

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to maintain tuberculosis (TB) testing records for 1 of 1 staff (Staff C). This failure resulted the home not having TB testing documentation available for department review.

Findings included...

Review of staff records showed Staff C, Caregiver, began working in the home 11/21/2023 and had documentation showing a TB blood test was conducted on 12/12/2023.

During an interview on 01/01/2024 at 8:45 PM Staff A, Provider stated Staff C obtained a TB blood test after receiving a positive TB skin test result. Provider stated they were unable to locate Staff C's the positive results from the TB skin test.

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, At Highly Favored One Adult Family Home LLC is or will be in compliance with this law and / or regulation on:
(Date) 01/24/2024

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

JOSEPH RWARA KAMAU
Provider (or Representative)

01/24/2024
Date

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

At Highly Favored One AFH,
TB Correction ;

The home will follow the regulation to.
home.
The home will keep TB records.

Thank you,
Joseph Kamau.

obtain TB blood test or TB skin test within three days of beginning to work in the

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