



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

Community Pride AFH LLC
Community Pride AFH LLC
PO Box 59
Saint John, WA 99171

RE: Community Pride AFH LLC # 754924

Dear Provider:

This document references Compliance Determination 41397 (05/21/2024), which included complaint number(s) 128349.

The Department completed a complaint investigation of your Adult Family Home on 05/21/2024 and found that your home does not meet the Adult Family Home Licensing requirements.

The department staff who did the inspection and provided consultation:

Kurt Routzahn, AFH/ALF Complaint Investigator

A licensor may consult with a provider when a violation of the Washington Administrative Code (WAC) or Revised Code of Washington (RCW) is found, but it is not cited in the Statement of Deficiencies. Violations may not be cited when it is a first-time violation of statute or rule with minimal or no harm to residents. A consult does not require a follow-up visit.

Consultation:

WAC 388-76-10025 License annual fee.

(3) The home must ensure that the department receives the annual license fee when it is due.

The annual licensing fee was not paid when due. Once the provider became aware of the oversight, the overdue payment was submitted. There was no negative outcome to residents.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:

- Inspect the home to determine if you have corrected all deficiencies.

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 (509)598-0182.

Sincerely,

Selena Clemons

Selena Clemons, Field Manager
Region 1, Unit E
Residential Care Services

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
Olympia, WA 98504-5600



**Residential Care Services
Investigation Summary Report**

Provider/Facility: Community Pride AFH LLC **Provider Type:** Adult Family Home

License/Cert. #: 754924

Intake ID: 128349

Compliance Determination #: 41397

Region/Unit #: RCS Region 1 / Unit E

Investigator: Kurt Routzahn

Investigation Date(s): 04/30/2024 through 05/21/2024

Complainant Contact Date(s):

Allegation(s):

1. March 2024 licensing fees were not paid.

Investigation Methods:

Sample:	Total residents: 6 Resident sample size: 0 Closed records sample size: 0
Observations:	N/A
Interviews:	Provider
Record Reviews:	License fees in STARS

Investigation Summary:

1. The provider reported they believed they had sent the payment. The provider sent the payment when they became aware of the oversight. Record review on 5/21/2024 in STARS showed the AFH paid the licensing fees and the home had a zero balance. Consultation citation written for WAC 388-76-10025; see Statement of Deficiencies dated 05/21/2024.

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A