



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
AGING AND LONG-TERM SUPPORT ADMINISTRATION  
20816 44th Ave West, Suite 240, Lynnwood, WA 98036-7744

September 29, 2021

Care with Dignity AFH LLC  
Care With Dignity AFH LLC  
6306 234TH ST SW  
MOUNTLAKE TERRACE, WA 98043

RE: Care With Dignity AFH LLC License #753387

Dear Provider:

On September 23, 2021 the Department completed a review of communication and / or documents from you indicating that you have corrected the deficiency or deficiencies cited in the report/s dated September 2, 2021.

Based on the review of this information the Department finds the deficiency or deficiencies have been corrected. Your home meets the adult family home licensing requirements.

The Department staff who did the off-site verification:  
Hang Lu, Licensor

If you have any questions please, contact me at (425) 670-6061.

Sincerely,

A handwritten signature in cursive script that reads "Brenda Mooney".

Brenda Mooney, Field Manager  
Region 2, Unit I  
Residential Care Services



**Residential Care Services  
Investigation Summary Report**

**Provider/Facility:** Care With Dignity AFH LLC (1057153) **Intake ID(s):** 3787628

**License/Cert. #:** AF753387

**Investigator:** Lu, Hang

**Region/Unit:** RCS Region 2/Unit I

**Investigation Date(s):** 08/24/2021 through 09/02/2021

**Complainant Contact Date(s):** 08/24/2021

**Allegations:**

It was alleged the adult family home did not pay the license fees (\$1350.00) due on 07/15/2021.

**Investigation Methods:**

**Sample:** Five of five residents

**Observations:** Environment, residents and staff interactions

**Interviews:** Residents, residents' representatives, caregivers, entity representative

**Record Reviews:** Department record, resident records and facility records

**Allegation Summary:**

Review of department record showed the AFH had not paid the annual license fee in the amount of \$1,350 by 07/15/2021. When interviewed on 08/24/2021, the entity representative did not realize the AFH license fee was overdue. Violation of regulation regarding license fee was identified.

**Unalleged Violation(s):**  Yes  No

None

**Conclusion / Action:**  **Failed Provider Practice Identified / Citation(s) Written**

**Failed Provider Practice Not Identified / No Citation Written**

See Statement of Deficiencies dated 09/02/2021.



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Statement of Deficiencies	License #: 753387	Completion Date
Plan of Correction	Care With Dignity AFH LLC	September 2, 2021
Page 1 of 2	Licensee: Care with Dignity AFH LLC	

You are required to be in compliance with all of the licensing laws and regulations at all times to maintain your adult family home license.

The department has completed data collection for the unannounced on-site complaint investigation of: 8/24/2021  
 Care With Dignity AFH LLC  
 6306 234TH ST SW  
 MOUNTLAKE TERRACE, WA 98043

This document references the following complaint number: 3787628  
 The department staff that inspected and investigated the adult family home:  
 Hang Lu, BSN, Licensor

From:  
 DSHS, Aging and Long-Term Support Administration  
 Residential Care Services, Region 2, Unit I  
 20816 44th Ave West, Suite 240  
 Lynnwood, WA 98036-7744  
 (425)670-6061

As a result of the on-site complaint investigation 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.

*Pat Kimmer, Field Manager for Brenda Mooney*  
 Residential Care Services *Field manager*

9/7/2021  
 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.

*N. Boyer*  
 Provider (or Representative)

9/13/2021  
 Date

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

**WAC 388-76-10025 License annual fee.**

(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 by the due date. This failure resulted in five of five residents (Residents 1, 2, 3, 4, and 5) living in a home that operated with an expired license.

**Findings included...**

On 08/24/2021, review of department record showed the AFH had not paid the annual license fee in the amount of \$1,350 by 07/15/2021.

During an on-site visit on 08/24/2021 at 2:30 PM, the home had 5 residents. No issues were found indicating any financial impact on the residents. The home had adequate amounts of food. The residents had all their needed supplies. All the utilities were working. No obvious signs of resident health and welfare issues were identified.

During a phone interview on 08/24/2021 at 4:40 PM, Staff A, Entity Representative, stated that she did not realize the annual license fee was overdue. Staff A stated that she would make sure a payment was sent to the department right away. On 08/25/2021, a copy of the check (in the amount of \$1350 and payable to the department) was received from the home.

**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, Care With Dignity AFH LLC is or will be in compliance with this law and / or regulation on (Date)\_\_\_\_\_. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

*N Poyner*

Provider (or Representative)

*9/13/2021*

Date

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