STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

Annaliese L. Krzyzanek
Careing Hands Adult Family Home
8610 W Bruneau Ave
Kennewick, WA 99336

RE: Careing Hands Adult Family Home License # 752706

Dear Provider:

This letter addresses Compliance Determination(s) 82758 (Completion Date 08/25/2026) and 79725 (Completion Date 07/31/2026).

The Department completed a follow-up inspection of your Adult Family Home on 08/25/2026 and found that you have corrected the violations listed in the Complaint report dated 07/31/2026. Your home is back in compliance as of 07/14/2026 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 388-76-10140-1

The Department staff who did the off-site verification:
Sarah Clark, Community Complaint Investigator

If you have any questions, please contact me at (509)572-7394.

Sincerely,

Michelle Ann Yarbrough

Michelle Yarbrough, Adult Family Home Field Manager
Region 1, Unit C
Residential Care Services

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

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

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 06/30/2026 and 07/14/2026 of:

Careing Hands Adult Family Home
8610 W Bruneau Ave
Kennewick, WA 99336

This document references the following complaint number(s): 230080, 230147, 231935, 230762, 232951

The following sample was selected for review during the unannounced on-site visit: 3 of 5 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Sarah Clark, Community Complaint Investigator

From:
DSHS, Home and Community Living Administration
Residential Care Services, Region 1 , Unit C
1200 Alder Street
Union Gap, WA 98903

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

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.

Michelle Ann Garbrough
Residential Care Services

07/31/2026
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.

Provider (or Representative)

8-11-2026
Date

WAC 388-76-10140 Qualifications Students Volunteers. The adult family home must ensure that students and volunteers meet the following minimum qualifications:

(1) Be eighteen years old or older;

This requirement was not met as evidenced by:

Based on interview and record review the Adult Family Home (AFH) failed to ensure a volunteer was eighteen years or older prior to hire. This failure resulted in five of five residents receiving care from an underage volunteer.

Findings included...

During an interview on 07/14/2026 at 12:41 PM, Staff A Provider, stated they had hired Staff B as a volunteer as they knew they were not 18 at time of hire. Staff A stated they were aware a caregiver needed to be 18 or older. Staff A also stated they were always in the home when Staff B worked providing personal care to residents.

Records review of Staff A's personnel file showed Staff A's date of birth was 01/18/2009 and was hired on 07/11/2026. Current age of 17.

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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 _____ 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.

Provider (or Representative) _____ Date _____

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Records review of Staff A's personnel file showed Staff A's date of birth was 01/18/2009 and was hired on 07/11/2026. Current age of 17.

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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, Careing Hands Adult Family Home is or will be in compliance with this law and / or regulation on
(Date) 7-14-2026

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

Provider (or Representative) — Date: 8-11-2026

Plan/ Attestation Statement

I have taken Corrective measures She is no longer with us. moving forward I will make sure they Are 18 years old

8-11-2026

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Provider (or Representative) Date

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