STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

FRANCISCA KARANJA & JOSEPH KURIA
Alpha 1 Adult Family Home
2622 S 296th Pl
Federal Way, WA 98003

RE: Alpha 1 Adult Family Home License # 755300

Dear Provider:

This letter addresses Compliance Determination(s) 73831 (Completion Date 03/04/2026) and 72929 (Completion Date 02/23/2026).

The Department completed a follow-up inspection of your Adult Family Home on 03/04/2026 and found that you have corrected the violations listed in the Full report dated 02/23/2026. Your home is back in compliance as of 02/27/2026 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 388-76-10455-2, WAC 388-76-10895-2-a

The Department staff who did the on-site verification:
Michele Grumke, AFH Licensor

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

Sincerely,

Lydia Owusu-Acheampong, Community Field Manager
Region 2, Unit G
Residential Care Services

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Statement of Deficiencies	License #: 755300	Compliance Determination # 72929
Plan of Correction	Alpha 1 Adult Family Home	Completion Date
Page 1 of 4	Licensee: FRANCISCA KARANJA & JOSEPH KURIA	02/23/2026

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 02/12/2026 of:
Alpha 1 Adult Family Home
31735 8th Ave S
Federal Way, WA 98003

The following sample was selected for review during the unannounced on-site visit: 2 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Michele Grumke, AFH Licensor

From:
DSHS, Home and Community Living 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

2-23-2026
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)

02/25/25
Date

WAC 388-76-10455 Medication Administration. For residents assessed with requiring the administration of medications, the adult family home must ensure medication administration is:

(2) By nurse delegation per WAC 246-840-910 through 246-840-970 ; unless

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure that 1 of 1 caregivers (Staff D, Caregiver) who administered eye drops to 1 of 1 resident (Resident 1) had received the instruction and training required for them to perform this delegated task. This placed Resident 1 at risk of medication errors from staff who has not been nurse delegated.

Findings included...

On 02/12/2026 at 11:53 AM, observation showed Staff D, administered eye drops into each of Resident 1's eyes.

On 02/12/2026 at 11:54 AM, observation showed Staff A, Entity Representative, searched through a binder with nurse delegation paperwork.

In an interview on 02/12/2026 at 11:57 AM, Staff A stated that the Registered Nurse Delegator (RND) had been at the AFH in November and had completed delegation. Staff A further stated that it was challenging to get the RND to send the nurse delegation paperwork.

A review of Resident 1's Negotiated Care Plan (NCP) dated 09/10/2025 showed Resident 1 was admitted to the AFH on [redacted]/2024. Further review showed Resident 1 did not have Nurse Delegated medication.

A review of Resident 1's February 2026 and January 2026 pharmacy generated Medication Administration Record (MAR) showed Resident 1 was prescribed "Ketotifen Fum" 0.025 percent (%), for itchy eyes, instill 1 drop into both eyes twice daily every morning and before bedtime and Refresh, for dry eye, instill 1 drop in both eyes four times daily. Further review showed all entries from 01/01/2026-02/12/2026 at 12:00 PM for Resident 1's "Ketotifen Fum" 0.025% and Refresh had been initialed as given.

In an interview on 02/13/2026 at 3:41 PM, Staff A stated that they had spoken to the RND who stated that Resident 1 had not been nurse delegated. Staff A further stated that Resident 1 administered their own eye drops. In addition, Staff A stated that they did not know why Staff D had administered the resident's eye drops.

In a follow up interview on 02/13/2026 at 3:45 PM, Staff D stated that they had been administering Resident 1's eye drops for several months.

In an interview on 02/18/2026 at 11:59 AM, Collateral Contact 1 (CC1) stated that Resident 1's "Ketotifen Fum" 0.025% had been prescribed on 10/18/2025 and Refresh had been prescribed on 10/02/2025.

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, Alpha 1 Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 02/25/26 .

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

Provider (or Representative) — Date: 02/25/26

WAC 388-76-10895 Emergency evacuation drills Frequency and participation.

(2) The adult family home must conduct:

(a) Partial emergency evacuation drills which occur during random staffing shifts at least every sixty days, with each resident participating in at least one each calendar year;

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 1 AFH provider completed partial emergency evacuation drills during random staffing shifts. This failure placed all residents' (Residents 1, 2, 3, 4, and 5) at risk of harm or injury in the event an emergency, requiring evacuation from the AFH occurred.

Findings included...

During a visit on 02/12/2026 at 8:52 AM, observation showed Residents 1, 2, 3, 4, and 5 lived in and received care from the AFH. Further observation showed Residents 1, 2, 3, and 5 ambulated independently and Resident 4 required staff assistance to propel their wheelchair.

A review of the AFH's "Emergency Evacuation Drill" logs showed an evacuation drill was conducted on 02/06/2026 from 10:05 AM-10:09 and did not indicate AM or PM. Further review showed an evacuation drill was conducted on 12/06/2025 from 12:30-12:33 and did not indicate AM or PM. In addition, review showed on 10/06/2025 an evacuation drill was conducted from 11:20 AM-11:24 AM. Review showed on 08/06/2025 an evacuation drill was conducted from 1:05-1:08 and did not indicate AM or PM. Further review showed an evacuation drill was conducted on 06/06/2025 from 12:25-12:30 and did not indicate AM or PM. In addition, review showed an evacuation drill was conducted on 04/06/2025 from 10:30-10:35 and did not indicate AM or PM. Review showed an evacuation drill was conducted on 02/06/2025 from 11:05-11:09 and did not indicate AM or PM. Review of the AFH's emergency evacuation drill logs dated 02/06/2026, 12/06/2025, 10/06/2025, 08/06/2025, 06/06/2025, 04/06/2025, and 02/06/2025 showed all drills were conducted between 10:05-1:39.

In an interview on 02/12/2026 at 10:45 AM, Staff A, Entity Representative, confirmed all drills were conducted between 10:05 AM-1:39 PM. Staff A stated that they had instructed staff to complete evacuation drills during all shifts, including at night.

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, Alpha 1 Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 02/25/26.

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

Provider (or Representative) Date 02/25/26