**STATE OF WASHINGTON**
**DEPARTMENT OF SOCIAL AND HEALTH SERVICES**
**Aging and Disability Services**
**Aging and Long-Term Support Administration**
PO Box 45600, Olympia, WA 98504-5600

November 24, 2014

**CERTIFIED MAIL 7008 1300 0000 7160 5239**

Licensee, Carlton Park AFH LLC.
Carlton Park AFH LLC.
4221 West Armour
Seattle, WA 98199

Adult Family Home License #**176104**
Entity Representative: Joann Carrington

**IMPOSITION OF CIVIL FINES**

Dear Licensee:

On November 18, 2014, the Department of Social and Health Services (DSHS), Residential Care Services completed an inspection/investigation at your facility. This letter is formal notice of the imposition of civil fines for your adult family home, located at **4221 West Armour**, **Seattle**, by the State of Washington, Department of Social and Health Services, pursuant to the Revised Code of Washington (RCW) 70.128.160 and Washington Administrative Code (WAC) 388-76-10940.

The civil fines are based on the following violations of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated **November 18, 2014**.

**CIVIL FINES**

**WAC 388-76-10225(1)(b)(iii) – Reporting requirement.** **$500.00**

**The licensee failed to ensure an incident of elopement was reported as required.**

**WAC 388-76-10400(3)(b) – Care and services.** **$500.00**

**The licensee failed to ensure care related to exiting the home was provided to a resident.**

***NOTE: These are the violations which resulted in the fines; see the attached Statement of Deficiencies for any additional violations.***

## Attestation (Plan of Correction):

Return the enclosed SOD within 10 calendar days with the following:

- The date you have or will have each deficiency corrected;
- A signature and date attesting that you are taking actions to correct and maintain correction for each cited deficiency.

Return the signed and dated SOD to:

Lois Rasmussen, Field Manager
District 2, Unit D
20425 – 72nd Avenue South, Suite 400
Kent, WA 98032-2388
Phone: (253) 234-6020 / Fax: (253) 395-5071

## Appeal Rights:

You have two appeal rights: Informal Dispute Resolution (IDR) and an Administrative Hearing. Each has a different request timeline.

Informal Dispute Resolution [RCW 70.128]

You have an opportunity to challenge the deficiencies and/or enforcement actions through the state's IDR process. **All IDR requests must be in writing and include:**

- The deficiencies you are disputing; and
- The method of review you prefer (face-to-face, telephone conference or documentation review).

**The written request must be received by the 10th working day from receipt of this letter.**

During the IDR process you will have the opportunity to present written and/or oral evidence to dispute the deficiencies.

Send your written request to:

Informal Dispute Resolution Program Manager
Residential Care Services
PO Box 45600
Olympia, Washington 98504-5600
Fax (360) 725-3225

Formal Administrative Hearing

You may contest the civil fines by requesting a formal administrative hearing to challenge the deficiencies which resulted in the civil fines. **All hearing requests must be in writing and include:**

- A copy of this letter; and
- A copy of the Statement of Deficiencies.

**The written request must be received within twenty-eight (28) calendar days of receipt of this letter.**

Send your **written** request to:

Office of Administrative Hearings
PO Box 42489
Olympia, Washington 98504-2489

## Payment:

If you do not request a formal administrative hearing, the civil fines is due to the Office of Financial Recovery twenty-eight (28) calendar days after receipt of this letter.

Mail a check for **$1,000.00** payable to the 'Department of Social and Health Services' at:

DSHS Office of Financial Recovery
PO Box 9501
Olympia, Washington 98507-9501

If the Office of Financial Recovery has not received your payment within twenty-eight (28) days after receipt of this letter, interest will begin to accrue immediately on the balance, at the rate of one percent per month. If you do not submit a hearing request or make payment within twenty-eight (28) days, the balance due will be recovered.

If you have any questions, please contact Lois Rasmussen, Field Manager at (253) 234-6020.

Sincerely,

Bett Schlemmer, RN, MN, MPA
Interim Assistant Director
Residential Care Services

Enclosure

cc: Robert Ogolsky, Compliance Specialist
Field Manager, District 2, Unit D
RCS District Administrator, District 2
HCS District Administrator, District 2
DDA District Administrator, District 2
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
Valentina Karnafel, HCS
NDL