



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Disability Services
Aging and Long-Term Support Administration
PO Box 45600, Olympia, WA 98504-5050

October 7, 2014

CERTIFIED MAIL 7008 1300 0000 7187 7087

(Letter Amending Enforcement Notice dated September 20, 2013 Amendments in bold italic)

Helen Releford Conway
Frank's Home
11033 SE 186th Street
Renton, WA 98055

License # 364400

**AMENDED NOTICE OF IMPOSITION OF
CIVIL FINE AND AMENDED STATEMENT OF
DEFICIENCIES**

Dear Ms. Conway:

This letter constitutes *amended* formal notice of the imposition of a civil fine for your adult family home, located at **11033 SE 86th Street, Renton**, 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 388-76-10940.

The civil fine is based on the following violations of the RCW and/or WAC found by the department in your adult family home. These and other deficiencies are more fully described in the attached *Amended* Statement of Deficiencies report **originally** completed by the department on **August 22, 2013**.

WAC 388-76-10205 - Medicaid or State Funded Residents. **\$500.00**

The provider failed to follow the terms of the state Medicaid contract and falsely submitted a voucher for care and services not provided.

WAC 76-10315(1)(g) – Resident record—Required. **\$100.00**

The provider failed to keep records on site and available to department staff. This is a repeat violation of deficiencies cited on January 4, 2012, and March 1, 2012.

Helen Releford Conway
Frank's Home
October 7, 2014
Page 2 of 2

WAC 388-786-10355(3) Negotiated care plan.

\$500.00

The provider failed to update a resident's negotiated care plan. This is a repeat violation of deficiencies cited on June 20, 2013.

Pursuant to the Stipulation and Agreed Order of Dismissal between your Adult Family Home and the Department signed by ALJ Shuman-Austin on September 15, 2014, the Department has amended this enforcement notice by reducing the civil fine for your violation of WAC 388-76-10205 from \$2,000.00 to \$500.00, and all other fines remain unchanged.

Attestation (Plan of Correction):

Return the enclosed SOD within 5 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:

Bennetta Shoop, Field Manager
District 2, Unit E
20425 – 72nd Avenue South, Suite 400
Kent, WA 98032-2388
Phone: (253) 234-6033 / Fax: (253) 395-5070

Payment:

Your payment of the fine is due twenty-eight (28) calendar days after your receipt of this notice. Please remit a check for **\$1,100.00** payable to the Department of Social and Health Services. The check should be sent to:

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

If payment has not been received within twenty-eight (28) days after receipt of this notice, interest will begin to accrue on the balance at the rate of one percent per month. If you do not make payment within twenty-eight (28) days, the balance due the department will be recovered.

If you have any questions, please contact Bennetta Shoop at (253) 234-6033.

Helen Releford Conway
Frank's Home
October 7, 2014
Page 2 of 2

Sincerely,



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

Enclosure

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