

November 30, 2011

CERTIFIED MAIL
(7007 1490 0003 4201 1328)

European Care Home Inc-Licensee
Simon Simunek-Entity Representative
European Care Home
3716 55th Avenue SW
Seattle, Washington 98116

License #750695

STOP PLACEMENT ORDER PROHIBITING ADMISSIONS
AND IMPOSITION OF CONDITIONS ON LICENSE

Dear Mr. Simunek:

This letter constitutes formal notice of a stop placement order prohibiting admissions and the imposition of conditions on the license for your adult family home located at **3716 55th Avenue SW, Seattle, Washington**, by the State of Washington, Department of Social and Health Services. This action is taken under the authority granted in the Revised Code of Washington (RCW) 70.128.160, chapter 43.20A RCW and the Washington Administrative Code (WAC) 388-76-10940.

The stop placement order prohibiting admissions to your adult family home license is based on violations of the RCW and WAC found by the department at your adult family home. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on November 9, 2011.

WAC 388-76-10020 (1) License-Ability to provide care and services.

The Entity Representative has demonstrated he lacks the ability to be a licensed Adult Family Home provider meeting the needs of vulnerable adults. Continued failure to meet the minimum standards places two current vulnerable adults and one former vulnerable adult and potential future residents at risk of receiving substandard care.

This is a repeat or uncorrected deficiency previously cited on March 16, 2011 and June 24, 2011.

WAC 388-76-10400 (2) Care and services.

The Entity Representative failed to provide the care and services required by four residents. This placed one resident at risk of not having her needs met, another resident at risk of not having his diabetes accurately monitored and two other residents not having their blood pressure monitored.

This is a repeat or uncorrected deficiency previously cited on June 24, 2011, February 8, 2011, and August 26, 2010.

WAC 388-76-10430 (2) Medication system.

The Entity Representative failed to ensure one resident received medications as prescribed by the physician.

WAC 388-76-10475 (3)(c)(i)(ii)(iii)(iv) Medication-Log.

The Entity Representative failed to ensure one resident's medications listed on their log were prescribed by the physicians. This caused the resident to receive medications different than prescribed by her physician and to receive other medications the physician did not prescribe.

The stop placement order prohibiting admissions and conditions on license to your adult family home is effective immediately upon notice to you either by personal service and/or certified mail receipt of this letter and the attached Statement of Deficiencies report. The stop placement order prohibiting admissions will not be postponed pending an administrative hearing or informal dispute resolution process, as is required by RCW 70.128.160(4). The stop placement applies to all new admissions, re-admissions, and transfer of residents.

The department, based on the findings of the inspection, has determined that the following condition(s) shall be placed on your adult family home:

- 1. The Entity Representative must hire at his own expense, a Registered Nurse consultant familiar with adult family home regulations and who has had no prior association with the adult family home.*
 - a. To assess each resident who has new orders, who returns from the hospital, or who has a change of conditions and work with the Entity Representative to ensure all the orders are followed.*
 - b. To assess all diabetics and train Entity Representative and all caregivers to ensure blood sugars are monitored properly, use the right equipment, and accurately record results.*
 - c. To review the home's medication systems and assist the Entity Representative to develop systems to ensure the home has written physician orders, accurate medication logs, and accurate labels are used.*

- d. The Entity Representative shall participate with the RN consultant on each visit to the home.*
 - e. Once systems are developed, the consultant shall be in the home weekly, for a minimum of three months to provide oversight and consultation. The consultant may decrease or increase the frequency of the contact based on progress in the home and discussion with the Field Manager*
 - f. The RN consultant must begin no later than December 7, 2011. Entity Representative shall provide the nurse consultant with a copy of the November 9, 2011 Statement of Deficiencies prior to her initiating services.*
- 2. The Entity Representative shall specifically name the qualified Resident Manager for this home.*
 - 3. Licensee must post the license with the enclosed Notice of Conditions of Operation in the adult family home in a location accessible to residents and visitors.*

The effective date of the conditions is **November 30, 2011**. The stop placement order prohibiting admissions on your license is effective **November 30, 2011**. As provided in RCW 70.128.160(4), WAC 388-76-10995, and WAC 388-76-10990, the effective date of the conditions on your license will not be postponed pending an administrative hearing or informal dispute resolution review.

During the stop placement, you may not admit any new resident to your adult family home. In addition, you may not allow any resident who was absent from the home due to a temporary non-out-patient stay (not including out-patient treatment) at a hospital, nursing home or other treatment center to return during the stop placement unless you obtain advance approval from the department. You may request such approval by contacting Lois Rasmussen, Field Manager at 253-234-6020.

Because it may not be possible to reach the Field Manager on a weekend or holiday, any pre-approval requests should be made as soon as possible during the business week. Such exceptions are made at the sole discretion of the department on a case-by-case basis. The department may impose sanctions or take other legal action if you fail to comply with the stop placement order prohibiting admissions.

The department will terminate the stop placement order prohibiting admissions when the violations necessitating the stop placement have been corrected and you exhibit the capacity to maintain adequate care and service.

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Plan
(Plan of Correction)

You Must:

Return the plan, on the enclosed report, within 10 calendar days after you receive this letter.

Include the following in your plan for each deficiency:

- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency

Send your plan to:

Lois Rasmussen, Field Manager
RCS Region 2, Unit D
20425 72nd Avenue S, Suite 400
Kent, WA 98032-2388

You may contest the amended stop placement order prohibiting admissions and imposition of conditions on license by requesting an administrative hearing. The Office of Administrative Hearings must receive your written request for a hearing within twenty-eight (28) calendar days following your receipt of this letter. A copy of this letter and a copy of the enclosed Statement of Deficiencies report must be included with your request. Send your request to:

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

As provided in WAC 388-76-10990, you may question cited deficiencies identified in the Statement of Deficiencies report and/or this enforcement action through the department's informal dispute resolution process. During the informal dispute resolution process you also have the right to present written evidence refuting the deficiencies.

To request an informal dispute resolution meeting, send your written request to:

Informal Dispute Resolution Program Manager
Aging and Disability Services Administration
PO Box 45600
Olympia, Washington 98504-5600
Fax (360) 725-3225

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The written request should:

- Identify the specific deficiencies and/or enforcement action(s) that are disputed;
- Explain why you are disputing the deficiencies and/or enforcement action(s);
- Indicate the type of dispute resolution process you prefer (direct meeting, telephone conference or documentation review); and
- Be sent within 10 working days of your receipt of this notice and Statement of Deficiencies report.

A request for informal dispute resolution review will not change the deadline for you to request an administrative hearing. Informal dispute resolution review by the department is not binding in an administrative hearing.

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

Sincerely,

Lori Melchiori, Ph.D.
Assistant Director
Residential Care Services

Enclosure

cc: Janice Schurman, Compliance Specialist
Field Manager, District 2, Unit D
RCS District Administrator, District 2
HCS Regional Administrator, Region 2
DDD Regional Administrator, Region 2
LTC Ombudsman
Area Agency on Aging, AAA- King
Medicaid Fraud Control Unit
John Ficker, HCS
HQ Central Files

REQUEST FOR AN ON-SITE REVISIT WITHIN 15 WORKING DAYS

AFH NAME: _____

ADDRESS: _____

DATE REQUEST FAXED: _____ **DATE MAILED:** _____

TO: _____, **Field Manager, Region** ____ **Unit** ____

I believe we have corrected the violations that led to my facility/home being placed in stop placement of new admissions. I am requesting an onsite revisit within 15 working days of receipt of this letter to verify that correction(s) is complete.

The following steps have been taken to ensure lasting correction.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Licensee or Designee Signature

Date