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

July 14, 2014

CERTIFIED MAIL 7007 1490 0003 4302 5232

Licensee, Wauna Shores Adult Family Home, Inc.
Wauna Shores Adult Family Home, Inc.
9717 128th Street Northwest
Gig Harbor, WA 98329

Adult Family Home License #751356
Entity Representative: Bryan Eck

IMPOSITION OF CIVIL FINES

Dear Mr. Eck:

On June 30, 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 9717 128th Street Northwest, Gig Harbor, 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 **June 30, 2014.**

CIVIL FINES

WAC 388-76-10161(2)(b) – Background checks—Who is required to have. $500.00

The licensee failed to ensure that one caregiver hired after January 2012 had completed a background check, including fingerprints.

This is a repeat deficiency from April 24, 2014.

WAC 388-76-10430(2)(c)(d) – Medication system. $1,000.00

The licensee failed to have a system in place to ensure residents received medications per physician's orders.

This is a repeat deficiency from April 24, 2014.

WAC 388-76-10475(3)(a) – Medication—Log. **$500.00**

The licensee failed to ensure medication logs were initialed and residents received prescribed medications.

This is a repeat deficiency from April 24, 2014.

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:

Dahl Kim, Field Manager
9501 Lakewood Drive SW, Suite E
Lakewood, WA 98499

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 are due to the Office of Financial Recovery twenty-eight (28) calendar days after receipt of this letter.

Mail a check for **$2,000.00** 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 Dahl Kim at (253) 983-3826.

Sincerely,

Linda Ranco

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

Enclosure

cc: Robert Ogolsky, Compliance Specialist
Field Manager, District 3, Unit A
RCS District Administrator, District 3
HCS District Administrator, District 3
DDA District Administrator, District 3
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
Valentina Karnafel, HCS
NDL