



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

August 3, 2016

**CERTIFIED MAIL 7007 1490 0003 4195 6101**

Licensee, Nick Calutoiu  
Orchard's Place  
7709 NE 147<sup>th</sup> Avenue  
Vancouver, WA 98682

Adult Family Home License #751374

**IMPOSITION OF CIVIL FINE AND  
CONDITIONS ON A LICENSE**

Dear Licensee:

On July 7, 2016, the Department of Social and Health Services (DSHS), Residential Care Services completed an inspection at your facility. This letter is formal notice of the imposition of a civil fine and conditions on the license for your adult family home, located at **7709 NE 47<sup>th</sup> Avenue, Vancouver**, 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 fine and conditions are based on the following violations of the RCW and/or WAC determined by the department in your adult family home and described in the attached Statement of Deficiencies (SOD) report dated **July 7, 2016**.

**Civil Fine**

**WAC 388-76-10750(6) – Safety and maintenance**

**\$100.00**

**The licensee failed to safely store toxic substances. This is a repeat deficiency from March 26, 2015 and February 20, 2014.**

**Conditions on License**

**WAC 388-76-10430(2) – Medication system**

**The licensee failed to ensure residents received medications as ordered for three of three sampled residents.**

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**WAC 388-76-10475(1)(2)(b)(c)(d)(e) – Medication Log**

The licensee failed to keep accurate and up to date Medication Administration Records (MAR) for three of three sampled residents.

**WAC 388-76-10490(1) – Medication disposal**

The licensee failed to ensure expired medications were safely disposed of for two of three sampled residents.

The department has determined that the following conditions shall be placed on your adult family home license:

- *The provider, at his own expense, must hire a nurse consultant familiar with Adult Family Home licensing requirements to assist the provider to develop and implement a safe medication management system ensuring, but no limited to:*
  - *Residents receive all medication as prescribed;*
  - *Medication logs are accurate and up to date;*
  - *Medications are properly disposed of;*
  - *All caregivers receive training regarding the medication management system.*
- *The nurse consultant must be hired by August 12, 2016.*
- *The nurse consultant will be available to the Department to answer questions.*
- *The Provider will give the nurse consultant a copy of the June 7, 2016 Statement of Deficiencies.*
- *The licensee must post this Notice of Conditions of Operation, with the license, in a visible location in a common use area.*

These conditions are effective on **August 3, 2016** and remain in effect until lifted by formal Department of Social and Health Services notice.

***NOTE: These are the violations which resulted in the fines and conditions; 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:

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- 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:

Karyl Ramsey, Field Manager  
Region 3, Unit E  
800 NE 136<sup>th</sup> Avenue, Suite 220  
Vancouver, WA 98684  
Phone: (360) 397-9556 / Fax: (360) 992-7969

### **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 10<sup>th</sup> 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 fine and conditions by requesting a formal administrative hearing to challenge the deficiencies which resulted in the civil fine and conditions. **All hearing requests must be in writing and include:**

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- A copy of this letter; and
- A copy of the Statement of Deficiencies.
- If you are requesting an **expedited** hearing for a summary suspension, stop placement or conditions on your home within **60 days**, you must provide a statement stating that you wish to have an **expedited** review. **Note:** No other actions qualify for an expedited review hearing.

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

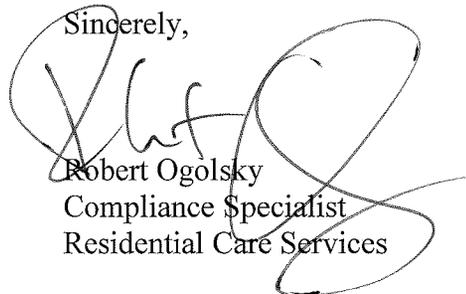
Mail a check for **\$100.00** payable to the 'Department of Social and Health Services' at:

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 Karyl Ramsey, Field Manager at (360) 397-9556.

Sincerely,



Robert Ogolsky  
Compliance Specialist  
Residential Care Services

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Enclosure

cc: Field Manager, Region 3, Unit E  
RCS Regional Administrator, Region 3  
HCS Regional Administrator, Region 3  
DDA Regional Administrator, Region 3  
WA LTC Ombuds  
Office of Financial Recovery, Vendor Program Unit  
HQ Central Files  
SG