



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 21, 2014

CERTIFIED MAIL 7008 1300 0000 7160 5215

Licensee, Brownville Manor Inc.
Brown Villa "B"
10317 61st Avenue South
Seattle, WA 98178

Adult Family Home License #752006
Entity Representative: Katherine Brown

IMPOSITION OF CONDITIONS ON A LICENSE

Dear Licensee:

On November 5, 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 conditions on the license for your adult family home, located at **10033 "B" 61st Avenue South, 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 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 **November 5, 2014**.

WAC 388-76-10225(1)(a)(i)(ii)(iii) – Reporting requirement.

The licensee failed to report to the department and local law enforcement agency for two residents who had altercations resulting in physical abuse.

This is a repeat deficiency from April 16, 2013 and August 13, 2013.

WAC 388-76-10430(1)(2)(d)(3) – Medication system.

The licensee failed to ensure two residents received their medications as prescribed.

This is a repeat deficiency from August 13, 2013 and November 12, 2013.

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NOTE: These are the violations which resulted in the conditions on the license; see the attached Statement of Deficiencies for any additional violations.

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

- ***The licensee, at the licensee's expense, must hire an outside Registered Nurse Consultant to assist the licensee in development and implementation of a system to ensure residents are safe from abuse and ensure a safe medication system meets the resident needs. This will include, but not limited to:***
 - *Identification of possible abuse, neglect, or exploitation;*
 - *Reporting any alleged or suspected neglect, abuse or exploitation consistent with all applicable laws;*
 - *Investigating and documenting any alleged or suspected neglect or abuse, exploitation, accident or incident jeopardizing, or affecting a resident's health or life in a timely manner; and*
 - *Implementing protections during the investigation;*
 - *Train the staff on abuse/neglect reporting requirements;*
 - *Coordinating with applicable resources to support and protect a victim of alleged abuse, neglect or exploitation;*
 - *Assess all resident medication orders, medication records and pharmacy records, and make changes to ensure they are in compliance with Adult Family Home laws and rules relating to medication systems;*
 - *Train the staff on the developed medication system and ensure they have the knowledge and skills for ongoing safe medication assistance/administration, including documentation on the logs.*

- ***The Registered Nurse Consultant must be hired by December 2, 2014.***

- ***The licensee and all staff will be trained by December 29, 2014.***

- ***The licensee will provide the Registered Nurse Consultant a copy of the November 5, 2014 Statement of Deficiencies.***

- ***The Registered Nurse Consultant must be available to the department to answer questions when requested.***

- ***The licensee must post this Notice of Conditions of Operation, with the license, in a visible location in a common use area.***

The effective date of the conditions on your license is **November 21, 2014**. As provided in RCW 70.128.162(b), WAC 388-76-10990 (6), the effective date of the conditions on your license will not be postponed pending an administrative hearing or informal dispute resolution review.

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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:

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

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

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Formal Administrative Hearing

You may contest the conditions by requesting a formal administrative hearing to challenge the deficiencies which resulted in the conditions. **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

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

Sincerely,

for D Longen-Grimes
Bett Schlemmer, RN, MN, MPA
Interim Assistant Director
Residential Care Services

Enclosure

cc: Dina Longen-Grimes, Compliance Specialist
Field Manager, District 2, Unit E
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