



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

September 5, 2014

**CERTIFIED MAIL 7007 1490 0003 4302 5836**

Licensee, Alpha and Omega Adult Foster Care II, LLC.  
Alpha and Omega Adult Foster Care II, LLC.  
PO Box 873940  
Vancouver, WA 98687

Adult Family Home License #752311  
Entity Representative: Emmanuel Zapanta

**IMPOSITION OF CIVIL FINE**

Dear Licensee:

On August 26, 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 a civil fine for your adult family home, located at **12521 NE 22<sup>nd</sup> Street**, 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 is based on the following violation of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated **August 26, 2014**.

**CIVIL FINE**

**WAC 388-76-10036(1)(2)(3) – License requirements—Multiple adult family home management.** **\$1,000.00**

**The licensee failed to ensure the home had a qualified Resident Manager.**

**This is a repeat citation from June 27, 2014.**

***NOTE: This is the violation which resulted in the fine; see the attached Statement of Deficiencies for any additional violations.***

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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:

Karyl Ramsey, Field Manager  
District 3, Unit E  
5411 E. Mill Plain Blvd, Suite 203  
Vancouver, WA 98661  
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

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Formal Administrative Hearing

You may contest the civil fine by requesting a formal administrative hearing to challenge the deficiencies which resulted in the civil fine. **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 fine is due to the Office of Financial Recovery twenty-eight (28) calendar days after receipt of this letter.

Mail a check for **\$1,000.00** 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 Karyl Ramsey, Field Manager at (360) 397-9556.

Sincerely,

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

Licensee, Alpha and Omega Adult Foster Care II, LLC.

Alpha and Omega Adult Foster Care II, LLC.

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Enclosure

cc: Robert Ogolsky, Compliance Specialist  
Field Manager, District 3, Unit E  
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