



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

January 10, 2014

CERTIFIED MAIL 7008 1300 0000 7187 8374

Michelle Leigh Mackey, Licensee
Serene Gardens
8312 35th Street W.
University Place WA 98466

Adult Family Home License #752369

IMPOSITION OF CONDITIONS ON A LICENSE

Dear Licensee:

On December 18, 2013, the Department of Social and Health Services (DSHS), Residential Care Services conducted an investigation at your facility. This letter is formal notice of the imposition of conditions on the license for your adult family home, located at 8312 35th Street W., University Place, 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 **December 18, 2013**.

WAC 388-10355(7)(c) Negotiated care plan

The licensee failed to ensure the negotiated care plan for a resident identified the care needed including an appropriate safety plan for exit seeking behavior.

WAC 388-76-10400(3)(b) Care and services.

The licensee failed to ensure one resident was cared for in a manner to support her safety and well-being, when the resident was allowed to elope and found several blocks from the home.

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

Michelle Leigh Mackey, Licensee
Serene Gardens
License #752369
January 10, 2014
Page 2

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

- *The licensee cannot admit or retain any residents with diagnoses of dementia and any residents with behaviors of wandering and elopement.*
- *The licensee must post this Notice of Conditions with the license in a visible location in a common use area.*

The effective date of the conditions on your license is **January 10, 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.

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
District 3, Unit A
P.O. Box 45819
MS: N27-24
Olympia WA 98504-5819
Phone: (253) 983-3826/ Fax: (253) 589-7240

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).

Michelle Leigh Mackey, Licensee
Serene Gardens
License #752369
January 10, 2014
Page 3

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 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.

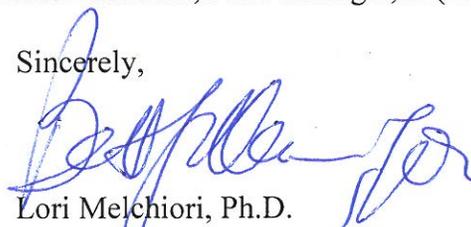
The written request must be received within twenty-eight (28) calendar days of receipt of this letter.

Send your **written** request to:

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

If you have any questions, please contact Dahl Kim, Field Manager, at (253) 983-3826.

Sincerely,



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

Enclosure

Michelle Leigh Mackey, Licensee
Serene Gardens
License #752369
January 10, 2014
Page 4

cc: Bett Schlemmer, Compliance Specialist
Field Manager, District 3, Unit A
RCS District Administrator, District 3
HCS District Administrator, District 3
DDD District Administrator, District 3
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
Judy Plesha, HCS
BAM

NOTICE OF CONDITIONS ON LICENSE

January 10, 2014

Based on the Statement of Deficiencies dated December 18, 2013, the Department of Social and Health Services imposes the following conditions on the license of ***Serene Gardens, License #752369, located at 8312 35th Street W., University Place, Washington.***

- ***The licensee cannot admit or retain any residents with diagnoses of dementia and any residents with behaviors of wandering and elopement.***
- ***The licensee must post this Notice of Conditions with the license in a visible location in a common use area.***

These conditions are effective on January 10, 2014, and remain in effect until lifted by formal Department of Social and Health Services notice.



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