



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

September 4, 2024

ELECTRONIC-FACSIMILE

Administrator
Fred Lind Manor
1802 17th Ave
Seattle, WA 98122

Assisted Living Facility License # **864**
Licensee: Fred Lind Manor

IMPOSITION OF CIVIL FINES

Dear Administrator:

On August 22, 2024, the Department of Social and Health Services (DSHS), Residential Care Services completed a Full Investigation at your facility. This letter constitutes formal notice of civil fines on the license for your assisted living facility, also known as **Fred Lind Manor**, located at **1802 17th Ave, Seattle**, by the State of Washington, Department of Social and Health Services. These actions are taken under the authority granted pursuant to Laws of 1998, Chapter 272 and RCW 18.20.190.

The civil fines on the license are based on the following violation of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated August 22, 2024.

Civil Fines

WAC 388-78A-2150(1)(2) Signing negotiated service agreement. **\$300.00**

The licensee failed to obtain signatures on the Service Plans (equivalent to Negotiated Service Agreement) for seven residents. This prevented the residents and/or their representative from confirming their agreement with and acceptance of the contents of the plans.

This is a recurring deficiency previously cited on April 12, 2023, and June 15, 2024.

WAC 388-78A-2730(1)(a)(b)(2)(b)(iii) Licensee's responsibilities. **\$700.00**

The licensee failed to maintain a Medical Testing Site Waiver/Clinical Laboratory Improvement Amendments (MTSW/CLIA) waiver certificate, failed to ensure two staff

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had a medical clearance for fit-testing, and four staff were fit-tested for respirator masks, and failed to ensure a copy of the results of the previous inspection were posted for residents, and resident representatives, to view. This placed 42 residents at risk for receiving waived tests, such as in-house diagnostic tests, without the facility having maintained the proper certificate, and at risk for communicable infection, and at risk for not knowing the facility's licensing inspection status with the Department.

This is a recurring deficiency previously cited on October 19, 2023, December 22, 2023, and February 27, 2024, for subsections (1)(b).

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:

Jamie Singer, Field Manager
Region 2, Unit J
20311 52nd Avenue West Suite 100
Lynnwood, WA 98036
Phone: (253) 312-1446 / Fax: (206) 971-6971
rcsregion2email@dshs.wa.gov

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 18.20.195]

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).

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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

Formal Administrative Hearing

You may contest the civil fines by requesting a formal administrative hearing to challenge the deficiency, 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 **\$1,000.00** payable to the 'Department of Social and Health Services', **and if you have or have had a Medicaid resident(s), please include your ProviderOne ID Number # on the check,** to:

DSHS Office of Financial Recovery
PO Box 9501
Olympia, WA 98507-9501
(360) 664-5919 / FAX: (360) 664-8401
OFRMMISVendor@dshs.wa.gov

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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 Jamie Singer, Field Manager, at (253) 312-1446.

Sincerely,



Matt Hauser
Compliance Specialist
Residential Care Services

Enclosure

cc: Field Manager, Region 2, Unit J
RCS Regional Administrator, Region 2
HCS Regional Administrator, Region 2
DDA Regional Administrator, Region 2
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
HQ Central Files
DRW
HP