Exhibit 10


STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
ALTSA, RCS, ICF/IID Survey \& Certification Program PO Box 45600, Olympia, WA 98504-5600

December 4, 2017
Email and Certified Mail \# 70172680000061875787
Important Notice - Please Read Carefully

Jeff Flesner, Acting Superintendent<br>Rainier School P.A.T. C<br>P O Box 600<br>Buckley, WA 98321<br>RE: Complaint Investigation 3461064 on 11/30/2017 through 12/01/2017 ASPEN Event ID: GDXR11<br>Dear Administrator/Superintendent:

From 11/30/2017 through 12/01/2017 survey staff from Residential Care Services (RCS) Division of the Aging and Long-Term Support Administration (ALTSA) conducted a complaint investigation at your facility. Based on that visit, RCS determined that Rainier School Pat C is out of compliance with a federal condition of participation (COP) requirement for ICFs/IID participating in the Medicaid Title XIX ICF/IID program. The non-compliance posed an immediate jeopardy (IJ) to the health and safety of the residents at Rainier School Pat C.

## Immediate Jeopardy (42 CFR 442.117 \& SOM 3010B)

On 12/01/2017, you were verbally informed that RCS had determined that Rainier School Pat C's noncompliance posed an immediate jeopardy to resident health and safety. The CMS Form 2567 statement of deficiencies is enclosed with this letter. A survey agency must terminate a facility's certification if it determines that (1) The facility no longer meets conditions of participation for ICFs/IID (2) The facility's deficiencies pose immediate jeopardy to residents' health and safety. Termination will take place on $12 / 24 / 2017$ if abatement of immediate jeopardy has not been achieved and verified before that date.

## Abatement of Immediate Jeopardy (SOM 3010B)

You must submit a credible letter of allegation before the survey team can verify on-site that the immediate jeopardy has been abated. The allegation must include sufficient
details to demonstrate how and when the immediate jeopardy has been removed.

## Compliance with CoPs

Compliance with all COPs, found in 42 Code of Federal Regulations (CFR) 483 Subpart 1 , is required for certification. The complaint investigation completed on 12/01/2017, found that Rainier School Pat C failed to comply with the following COP:

## W102-42 CFR 483.410 Governing Body and Management

Specifically, the following Governing Body and Management requirements were found not met:

W104 - CFR 483.410(a)(1) The governing body must exercise general policy, budget, and operating direction over the facility.

In addition the following regulations were found not met:
W186 - CFR $483.430(\mathrm{~d})(1)$ The facility must provide sufficient direct care staff to manage and supervise clients in accordance with their individual program plans.

The deficiencies are described in CMS Form 2567, a copy of which is attached. The cited deficiencies indicate limitations in Rainier School Pat C's capacity to provide adequate services for clients. Significant corrections will be required before the facility can be found to be in compliance.

## Informal Dispute Resolution (IDR)

You may request an IDR of the deficiencies on which this action is based. RCS must receive your request for an IDR within 10 days of receipt of this letter. To request an informal dispute resolution (IDR) meeting, please send your written request to Informal Dispute Resolution Program Manager, PO Box 45600, Olympia, Washington 98504-5600. If you request an IDR, you must still submit a written credible allegation of compliance within the time limits described above. The written IDR request should:

1. Identify the specific deficiencies that are disputed;
2. Explain why you are disputing the deficiencies; and
3. Indicate the type of dispute resolution process you prefer (face-to-face, telephone conference or documentation review)

If requested, an IDR will be scheduled. During the informal process you have the right to present written and/or oral evidence refuting the deficiencies. The IDR process will not change the time frames stated in this letter, including the deadlines for achieving compliance and submitting a written credible allegation of compliance.

If you have any questions concerning the instructions contained in this letter, please


## Enclosure

cc: Steve Chickering, CMS Regional Office Patrick Thrift, CMS Regional Office Julius Bunch, CMS Regional Office Bill Moss, Assistant Secretary, ALTSA Candace Goehring, Director, RCS Loida Baniqued, Chief, HQ Operations Angela Coats McCarthy, Assistant Attorney General Evelyn Perez, Assistant Secretary, DDA<br>Donald Clintsman, Deputy Assistant Secretary, DDA Charles Weedin, DDA Christina Wells, DDA Saif Hakim, DDA Mick Pettersen, DDA Charissa Fotinos, HCA Stacie Siebrecht, DRW

