

**STATE OF NEVADA
BOARD OF EXAMINERS FOR LONG-TERM CARE ADMINISTRATORS
3157 North Rainbow Boulevard, #313
Las Vegas, Nevada 89108
Telephone: 702-486-5445 Fax: 702-486-5439
Website: www.beltca.nv.gov
E-mail: beltca@beltca.nv.gov**

MEETING NOTICE AND AGENDA

Date & Time:	May 8, 2014, 9:30 a.m.
Place of Meeting:	The Grant Sawyer State Office Building 555 East Washington Avenue Room 4401 Las Vegas, Nevada 89101
Video Conferencing	and Legislative Counsel Bureau Conference Room 3138 401 South Carson Street Carson City, Nevada 89701

All times are approximate. The Board reserves the right to take items in a different order, items may be combined for consideration by the Public Body and items may be pulled or removed at any time to accomplish business in the most efficient manner.

In certain situations, the option exists to declare the meeting on that agenda item to be a Closed (Executive) Session per NRS 241.030.

I. OPEN MEETING

II. ROLL CALL

III. PUBLIC COMMENTS

This item is to receive comments, limited to five (5) minutes, on any issue and any discussion of those items. However, no action will be taken on an item raised during Public Comments. Comments based on viewpoint are welcome.

IV. WELCOME NEW BOARD MEMBER, LILIA SIOSON AND ACKNOWLEDGE THE MANY YEARS OF SERVICE BY FORMER BOARD MEMBER, DOUGLAS SINCLAIR



- V. APPROVAL OF THE FOLLOWING PROPOSED DISCIPLINARY ACTION** (Board may go into closed session) "FOR POSSIBLE ACTION"
- a. Leonard Arnold – Wentworth of Las Vegas – Case No. B-36092
 - b. Natalie Hayes – Vintage Park at San Martin – Case No. B-36083
 - c. Julie Liebo – Emeritus @ Las Vegas – Case No. B-36071/74
 - d. Olivia Parnell – Feli's Care Home – Case No. B-36093
- VI. SECRETARY'S REPORTS:
- a. Approve Minutes of February 6, 2014 Meeting "for possible action".
- VII. ADMINISTRATIVE REPORT
- VIII. ADMINISTRATOR LICENSES ISSUED MUST RECEIVE FINAL BOARD APPROVAL WHEN ALL REQUIREMENTS HAVE BEEN MET.
- a. Nursing Facility Administrator Licenses Issued "for possible action".
 - (1) Okekeocha, Helway
 - (2) Murphy, Brian
 - (3) Morella, Anthony
 - (4) Lauretta, Marlene
 - (5) Costanzo, Jordan
 - b. Residential Facility Administrator Licenses Issued "for possible action".
 - (1) Acoba, Oscar
 - (2) Buntin, Emily
 - (3) Doran, Mary
 - (4) Gasataya, Eugene
 - (5) Birke, Mesfin
 - (6) Dale, Charo
 - (7) Denoncourt, James
 - c. Inactive Requests "for possible action".
 - (1) McDonald, Jason - NFA
 - (2) Hayes, Natalie - RFA
 - (3) Trump, Donald - RFA
 - (4) Hofer, Linda - RFA
 - e. Approve/Deny NFA Application "for possible action".
 - (1) Christensen, Cory
- IX. UNFINISHED BUSINESS:
- a. RCAL AIT Program Reports –The ABBA Group
 - b. NFA lack of AIT opportunities, obtaining grants and formalize training for preceptors "for possible action"

X. NEW BUSINESS:

- a. Election of a new Board Secretary/Treasurer "for possible action"
- b. National Leadership Emergence Conference – Review applications to award scholarship "for possible action"
- c. New Regulation Training Program
- d. RFA Mentor/NFA Preceptor Program

XI. DEPUTY ATTORNEY GENERAL'S REPORT

XII. BOARD MEMBER COMMENTS

XIII. PUBLIC COMMENTS

This item is to receive comments, limited to five (5) minutes, on any issue and any discussion of those items. However, no action will be taken on an item raised during Public Comments. Comments based on viewpoint are welcome.

XIV. TIME/DATE/LOCATION OF NEXT REGULAR QUARTERLY MEETING(S) "for possible action"

XV. ADJOURNMENT

****Pursuant to NRS 241.030(1), The Nevada State Board of Examiners for Long Term Care Administrators may conduct a closed meeting to consider the character, allegations of misconduct, professional competence, or physical and mental health of a person.**

Note: We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary please notify the Board of Examiners for Long Term Care Administrators by calling the Board Office at 702-486-5445, or by e-mail at: beltca@beltca.nv.gov.

Anyone desiring additional information regarding the meeting, including information on how to obtain supporting board meeting material is invited to call Sandy Lampert, Executive Director, at (702) 486-5445.

Copies of BELTCA's Meeting Minutes are available at no charge at BELTCA's web site at:
beltca.nv.gov

**The Agenda was posted at the following locations:
BELTCA'S website: www.beltca.nv.gov**

Grant Sawyer State Office Building
555 East Washington Ave.
Las Vegas, NV 89101
Fax: 702-486-2012

ADSD
3416 Goni Rd., Building – D 132
Carson City, NV 89706
Fax: 775-687-0574

ADSD
1860 East Sahara Ave.
Las Vegas, NV 89104
Fax: 702-486-3572

DPBH
727 Fairview Dr., Suite E
Carson City, NV 89706
Fax: 775-684-1073

DPBH
4220 S. Maryland Pkwy.
Suite 810, Bldg. D
Las Vegas, NV 89119
Fax: 702-486-6520

ADSD
445 Apple Street
Reno, NV 89502
Fax: 775-688-2969

Public Library
Sierra View Branch
Fax 775-827-8792

Carson City Courthouse
100 Stewart St.
Carson City, NV 89701
Fax: 775-887-2146

Clark County – Las Vegas Library
732 North Las Vegas Blvd.
Las Vegas, NV 89101
Fax: 702-507-3598

By E-Mail

Sue Levinsky, ADSD, LV
Paul Shubert, DPBH, LV
Heather Korbolic, ADSD
Charles Perry
Lynn Ann Hornick
Rich Hernandez, Senior Transitions
Theresa Brushfield
Ed Vogel, Las Vegas Review-Journal
Mark McBride, Administrator
Chris Nicholas, Administrator

Jill Berntson, ADSD, Reno
Teresa Stricker, ADSD, LV
Donna McCafferty, DPBH
Rosemary Womack, The Abba Group
Daniel Mathis, NVHCA
Shawn McGivney
Rexanne O. Warner, United Health Care
Robbie Williams, Administrator
James Sullivan, Administrator
Susan Magluilo, Administrator

STATE OF NEVADA
BOARD OF EXAMINERS FOR
LONG TERM CARE ADMINISTRATORS

3157 NORTH RAINBOW BLVD., NO. 313

LAS VEGAS, NEVADA 89108

Phone: 702-486-5445 Fax: 702-486-5439

E-Mail: beltca@beltca.nv.gov

Website: www.beltca.Nevada.gov

BOARD MEMBERS

Margaret A. McConnell, Chairperson

Administrator

Las Vegas, NV 89102

Phone: (702) 486-5445

Fax: (702) 486-5439

E-Mail: beltca@beltca.nv.gov

Term: 3/94 – 10/31/2014

Mary Ellen Wilkinson

Vice Chairperson

Precision Document Imaging

429 West First Street

Reno, NV 89503

Phone: (775) 337-1987

Fax: (775) 337-1141

Email: mew@precisiondi.com

Term: 5/24/96 - 10/31/2015

Lilia Sioson

Board Member

3157 N. Rainbow Blvd. #313

Las Vegas, NV 89108

Phone: (702) 486-5445

Fax: (702) 486-5439

Email: beltca@beltca.nv.gov

Term: 2/14 – 10/31/2016

Terry Clodt

Board Member

3157 N. Rainbow Blvd. #313

Las Vegas, NV 89108

Phone: (702) 458-8239

Fax: (702) 658-7484

Email: Tclodt@aol.com

Term: 10/31/05 – 10/31/2014

Linda K. Geling

Board Member

3157 North Rainbow Blvd., #313

Las Vegas, NV 89108

Phone: (702) 486-5445

Fax: (702) 486-5439

Email: beltca@beltca.nv.gov

Term: 10/31/2009 – 10/31/2014

Jane Gruner

Administrator

Aging & Disabilities Services Division

3416 Goni Road, Suite D-132

Carson City, NV 89706

Phone: (775) 687-0515

Fax: (775) 687-0574

Email: jgruner@dhhs.nv.gov

Term: Statute

Lindsay T. Hansen, M.D.

Board Certified in Internal Medicine

63 Town Center Drive, Ste. 506

Las Vegas, NV 89144

Phone: (702) 240-8111

Fax: (702) 240-0658

Email: lindsayhansen@cox.net

Term: 11/1/2010 – 10/31/16

Sophia G. Long Esq.

Deputy Attorney General

555 East Washington Avenue

Suite 3900

Las Vegas, NV 89101

Phone: (702) 486-3165

Fax: (702) 486-3416

E-mail: slong@ag.nv.gov

Sandy Lampert

Executive Director

3157 N. Rainbow Blvd. #313

Las Vegas, NV 89108

Phone: (702) 486-5445

Fax: (702) 486-5439

Email: beltca@beltca.nv.gov

1 **BEFORE THE NEVADA STATE BOARD OF EXAMINERS**
2 **FOR LONG TERM CARE ADMINISTRATORS**

3
4 In the Matter of the Complaint for
5 Disciplinary Action Against

6 LEONARD A. ARNOLD,

7 RESPONDENT

8 Residential Facility Administrator for

9 THE WENTWORTH OF LAS VEGAS
10

Case No. B-36092

Filed: _____

Executive Director

11
12 **STIPULATION FOR SETTLEMENT OF DISCIPLINARY ACTIONS**

13 WHEREAS, as more fully addressed below, the NEVADA STATE BOARD OF
14 EXAMINERS OF LONG TERM CARE ADMINISTRATORS, ("BOARD"), and RESPONDENT
15 LEONARD A. ARNOLD ("RESPONDENT" or "ARNOLD") (collectively referred to as "the
16 Parties"), hereby enter into this Stipulation for Settlement of Disciplinary Actions as follows:

17 **Jurisdiction**

- 18
- 19 1. Pursuant to Nevada Revised Statute 654.110(1)(f), the BOARD has jurisdiction to
20 receive, investigate and take appropriate action with respect to any charge or
21 complaint filed with the BOARD against a licensee.
 - 22 2. RESPONDENT at all times relevant hereto, was and currently is, licensed in the
23 State of Nevada as a residential facility administrator ("RFA") by the BOARD,
24 pursuant to the provisions of Nevada Revised Statutes and Nevada Administrative
25 Code chapters 654.
 - 26 3. At all times relevant hereto, RESPONDENT was the Administrator of THE
27 WENTWORTH OF LAS VEGAS, 2620 Lake Sahara Dr., Las Vegas, NV 89117
28

1 ("the Facility"), License No. 9291, and as a result of such licensure, his/her conduct
2 in the capacity of a licensee was and is governed by Nevada Revised Statutes
3 Chapter 654, Nevada Administrative Code 654, and other provisions of Nevada law.

- 4 4. Pursuant to Nevada Revised Statute 233B.121(5), the BOARD is authorized to
5 enter into a settlement agreement to resolve a disputed matter.

6 **Allegations**

- 7 5. On or about June 12, 2013 through June 27, 2013, the State of Nevada, Division of
8 Public and Behavioral Health ("DPBH") conducted complaint investigations at The
9 Wentworth of Las Vegas, and subsequently DPBH issued its Statements of
10 Deficiencies ("SOD") against the Facility.

- 11 6. On or about February 11, 2014, the BOARD sent a "Notice Pursuant to Nevada
12 Revised Statutes ("NRS") 233B.127(3) of Intent to Take Administrative Action for
13 Violations of Chapter 654 of NRS and Chapter 449 of NRS" to RESPONDENT, by
14 certified mail, notifying him or her of an investigation concerning allegations of
15 Chapter 654 violations.

- 16 7. On March 25, 2014, the Board sent correspondence to RESPONDENT, by certified
17 mail, notifying RESPONDENT that sufficient evidence had been found for
18 disciplinary action to be commenced, and that the BOARD proposed such action
19 would be brought for an administrative hearing.

- 20 8. Respondent acknowledges that information has been received by the BOARD or its
21 agent, which constitutes sufficient grounds for the initiation of an administrative
22 hearing.

- 23 9. The Parties desire to resolve any disputed matters relating to the BOARD'S
24 investigation, and recognize that continued litigation of this dispute would be
25 protracted, costly and time consuming, and therefore, the Parties have reached a
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settlement agreement in the interest of judicial and administrative economy.

Violations of Law

10. RESPONDENT admits that the conduct set forth in the DPBH survey and/or complaint investigation constitutes a violation of law regulating the practice of residential facility administrators and/or skilled nursing administrators. RESPONDENT has elected to enter into this settlement agreement rather than face the possibility of further disciplinary action by the BOARD.

Administrative Penalty

11. RESPONDENT shall voluntarily surrender his license and agrees that he will not reapply for a Residential Facility Administrator's license in the future. Respondent will also pay the following monetary assessment to the BOARD:

Administrative & Legal Costs: 350.00

RESPONDENT shall pay to the BOARD the total sum of \$350.00, in twelve (12) installments consisting of the first payment being ten (10) percent of the total balance equaling \$34.96 and eleven (11) equal monthly installment payments \$28.64 thereafter.

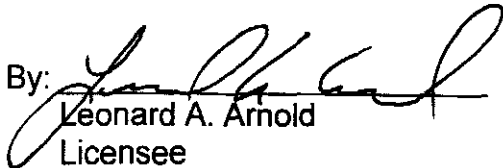
12. The first payment of \$34.96 is due and payable within thirty (30) days after the EFFECTIVE DATE of the BOARD'S Final Order, with eleven (11) additional installment payments of \$28.64, each installment payment becoming due and payable on the 15th day of each next succeeding month after the first payment, until the total balance due is paid in full. No grace period will be permitted. Any installment payment not actually received by the BOARD on or before its due date shall be construed as an event of default of this agreement by the RESPONDENT.

Complete Agreement

30. This settlement agreement consists of eight pages and embodies the entire agreement between the BOARD and RESPONDENT. It may not be altered, amended or modified without the express consent of the parties.

Date: 3/20/2014

Date: _____
NEVADA STATE BOARD OF
EXAMINERS OF LONG TERM CARE
ADMINISTRATORS

By: 
Leonard A. Arnold
Licensee

By: _____
Sandy Lampert
Executive Director

BEFORE THE NEVADA STATE BOARD OF EXAMINERS
FOR LONG TERM CARE ADMINISTRATORS

In the Matter of the Complaint for
Disciplinary Action Against

NATALIE R. HAYES,

RESPONDENT

Residential Facility Administrator for
VINTAGE PARK AT SAN MARTIN

Case No. B-36083

Filed: _____

Executive Director

STIPULATION FOR SETTLEMENT

WHEREAS, as more fully addressed below, the NEVADA STATE BOARD OF EXAMINERS OF LONG TERM CARE ADMINISTRATORS, ("BOARD"), and RESPONDENT NATALIE R. HAYES ("RESPONDENT" or "HAYES") (collectively referred to as "the Parties"), hereby enter into this Stipulation for Settlement as follows:

Jurisdiction

1. Pursuant to Nevada Revised Statute 654.110(1)(f), the BOARD has jurisdiction to receive, investigate and take appropriate action with respect to any charge or complaint filed with the BOARD against a licensee.
2. RESPONDENT at all times relevant hereto, was and currently is, licensed in the State of Nevada as a residential facility administrator ("RFA") by the BOARD, pursuant to the provisions of Nevada Revised Statutes and Nevada Administrative Code chapters 654.
3. At all times relevant hereto, RESPONDENT was the Administrator of VINTAGE PARK AT SAN MARTIN, 7230 Gagnier Blvd., Las Vegas, NV 89113 ("the Facility"),

1 License No. 9284, and as a result of such licensure, his/her conduct in the capacity
2 of a licensee was and is governed by Nevada Revised Statutes ("NRS") Chapter
3 654, Nevada Administrative Code ("NAC") 654, and other provisions of Nevada law.

- 4 4. Pursuant to Nevada Revised Statute 233B.121(5), the BOARD is authorized to
5 enter into a settlement agreement to resolve a disputed matter.

6 **History**

- 7 5. On or about August 12, 2013 through September 10, 2013, the State of Nevada,
8 Division of Public and Behavioral Health ("DPBH") conducted complaint
9 investigations at Vintage Park at San Martin, and subsequently DPBH issued its
10 Statements of Deficiencies ("SOD") against the Facility.
11
12 6. On or about November 21, 2013, the BOARD sent a "Notice Pursuant to Nevada
13 Revised Statutes ("NRS") 233B.127(3) of Intent to Take Administrative Action for
14 Violations of Chapter 654 of NRS and Chapter 449 of NRS" to RESPONDENT, by
15 certified mail, notifying him or her of an investigation concerning allegations of
16 Chapter 654 violations ("the Administrative Action Letter").
17
18 7. On December 12, 2013, the Board sent correspondence to RESPONDENT, by
19 certified mail, notifying RESPONDENT that sufficient evidence had been found for
20 disciplinary action to be commenced, and that the BOARD proposed such action
21 would be brought for an administrative hearing.
22
23 8. The Parties desire to resolve any disputed matters relating to the BOARD'S
24 investigation, and recognize that continued litigation of this dispute would be
25 protracted, costly and time consuming, and therefore, the Parties have reached a
26 settlement agreement in the interest of judicial and administrative economy.
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Alleged Violations of Law

9. RESPONDENT acknowledges that NAC 654.164(2) provides that an RFA is responsible for ensuring that the residents of the Facility receive protective supervision and that the failure to comply with NAC 654.164(2) constitutes a violation of law regulating the practice of residential facility administrators and/or skilled nursing administrators.
10. RESPONDENT has elected to enter into this settlement agreement rather than face the possibility of further disciplinary action by the BOARD if the Board were to prevail at a disciplinary hearing.

Administrative Penalty

11. RESPONDENT shall complete 3 approved CEU hours on Resident Supervision and submit the Certificates of Completion to the Board within thirty (30) days after the Effective Date of the Board's Final Order, and pay the following monetary assessment to the BOARD:

Administrative Fine: \$ 3,000.00

Administrative & Legal Costs: 350.00

Total Assessed: \$ 3,350.00

12. RESPONDENT shall pay to the BOARD the total sum of \$3,350.00, in twenty four (24) installments consisting of the first payment being ten (10) percent of the total balance equaling \$334.93 and twenty three (23) equal monthly installment payments \$131.09 thereafter. RESPONDENT may prepay all or part of the total assessed at any time.
13. The first payment of \$334.93 is due and payable within thirty (30) days after the EFFECTIVE DATE of the BOARD'S Final Order, with twenty three (23) additional installment payments of \$131.09, each installment payment becoming due and

1 Complete Agreement

2 31. This settlement agreement consists of eight pages and embodies the entire
3 agreement between the BOARD and RESPONDENT. It may not be altered,
4 amended or modified without the express consent of the parties.
5

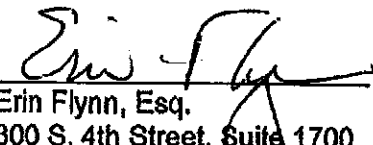
6 Date: 4/25/14

Date: _____
NEVADA STATE BOARD OF
EXAMINERS OF LONG TERM CARE
ADMINISTRATORS

7
8
9 By: 
10 Natalie R. Hayes
11

By: _____
Terry Clodt
Investigating Board Member

12 Approved as to form and content:
13 LIONEL SAWYER & COLLINS

14 By: 
15 Erin Flynn, Esq.
16 300 S. 4th Street, Suite 1700
17 Las Vegas, NV 89101
18 (702) 383-8888
Attorney for Natalie R. Hayes
19
20
21
22
23
24
25
26
27
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Attorney General's Office
555 E. Washington, Suite 3900
Las Vegas, NV 89101

Jan. 31, 2014 10:57AM

No. 9081 P. 1

**BEFORE THE NEVADA STATE BOARD OF EXAMINERS
FOR LONG TERM CARE ADMINISTRATORS**

In the Matter of the Complaint for
Disciplinary Action Against

JULIE M. LIEBO,

RESPONDENT

Residential Facility Administrator for
EMERITUS @ LAS VEGAS

Case No. B-36071 and B-36074

Filed: _____

Executive Secretary

STIPULATION FOR SETTLEMENT OF DISCIPLINARY ACTIONS

WHEREAS, as more fully addressed below, the NEVADA STATE BOARD OF EXAMINERS OF LONG TERM CARE ADMINISTRATORS, ("BOARD"), and RESPONDENT JULIE M. LIEBO ("RESPONDENT" or "LIEBO") (collectively referred to as "the Parties"), hereby enter into this Stipulation for Settlement of Disciplinary Actions as follows:

Jurisdiction

1. Pursuant to Nevada Revised Statute 654.110(1)(f), the BOARD has jurisdiction to receive, investigate and take appropriate action with respect to any charge or complaint filed with the BOARD against a licensee.
2. RESPONDENT at all times relevant hereto, was and currently is, licensed in the State of Nevada as a residential facility administrator ("RFA") by the BOARD, pursuant to the provisions of Nevada Revised Statutes and Nevada Administrative Code chapters 654.
3. At all times relevant hereto, RESPONDENT was the Administrator of EMERITUS @ LAS VEGAS, 3025 E. Russell Rd., Las Vegas, NV 89120 ("the Facility"), License

No. 9303, and as a result of such licensure, his/her conduct in the capacity of a licensee was and is governed by Nevada Revised Statutes Chapter 654, Nevada Administrative Code 654, and other provisions of Nevada law.

4. Pursuant to Nevada Revised Statute 233B.121(5), the BOARD is authorized to enter into a settlement agreement to resolve a disputed matter.

Allegations

5. On or about December 27, 2012 through March 20, 2013, and November 19, 2012 through November 21, 2012, the State of Nevada, Division of Public and Behavioral Health ("DPBH") conducted complaint investigations at Emeritus @ Las Vegas, and subsequently DPBH issued its Statements of Deficiencies ("SOD") against the Facility.

6. On or about July 19, 2013, and July 23, 2013, the BOARD sent a "Notice Pursuant to Nevada Revised Statutes ("NRS") 233B.127(3) of Intent to Take Administrative Action for Violations of Chapter 654 of NRS and Chapter 449 of NRS" to RESPONDENT, by certified mail, notifying him or her of an investigation concerning allegations of Chapter 654 violations.

7. On October 31, 2013, the Board sent correspondence to RESPONDENT, by certified mail, notifying RESPONDENT that sufficient evidence had been found for disciplinary action to be commenced, and that the BOARD proposed such action would be brought for an administrative hearing.

8. Respondent acknowledges that information has been received by the BOARD or its agent, which constitutes sufficient grounds for the initiation of an administrative hearing.

9. The Parties desire to resolve any disputed matters relating to the BOARD'S investigation, and recognize that continued litigation of this dispute would be

1 protracted, costly and time consuming, and therefore, the Parties have reached a
2 settlement agreement in the interest of judicial and administrative economy.

3 **Violations of Law**

- 4 10. RESPONDENT does not contest that the conduct set forth in the DPBH survey
5 and/or complaint investigation constitutes a violation of law regulating the practice
6 of residential facility administrators and/or skilled nursing administrators.
7 RESPONDENT has elected to enter into this settlement agreement to avoid further
8 costs and to avoid the possibility of further disciplinary action by the BOARD.
9

10 **Administrative Penalty**

- 11 11. RESPONDENT shall complete 3 approved CEU hours on Administrative Oversight
12 and 3 approved CEU hours on Plant Maintenance and submit the Certificates of
13 Completion to the Board within thirty (30) days after the Effective Date of the
14 Board's Final Order, and pay the following monetary assessment to the BOARD:

15 Administrative Fine: \$ 500.00

16 Administrative & Legal Costs: 350.00

17 Total Assessed: \$ 850.00

- 18
19 12. RESPONDENT shall pay to the BOARD the total sum of \$850.00, in twelve (12)
20 installments consisting of the first payment being ten (10) percent of the total
21 balance equaling \$84.95 and eleven (11) equal monthly installment payments
22 \$69.55 thereafter.

- 23 13. The first payment of \$84.95 is due and payable within thirty (30) days after the
24 EFFECTIVE DATE of the BOARD'S Final Order, with eleven (11) additional
25 installment payments of \$69.55, each installment payment becoming due and
26 payable on the 15th day of each next succeeding month after the first payment, until
27 the total balance due is paid in full. No grace period will be permitted. Any
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1
2 **Complete Agreement**

3 32. This settlement agreement consists of eight pages and embodies the entire
4 agreement between the BOARD and RESPONDENT. It may not be altered,
5 amended or modified without the express consent of the parties.

6 Date: 1/30/14

Date: _____

NEVADA STATE BOARD OF
EXAMINERS OF LONG TERM CARE
ADMINISTRATORS

9
10 By: Julie M. Liebo

11 Julie M. Liebo
Licensee

By: _____

Sandy Lampert
Executive Secretary

1 **BEFORE THE NEVADA STATE BOARD OF EXAMINERS**
2 **FOR LONG TERM CARE ADMINISTRATORS**

3
4 In the Matter of the Complaint for
5 Disciplinary Action Against

Case No. B-36093

6 OLIVIA F. PARNELL,

Filed: _____

7 RESPONDENT

8 Residential Facility Administrator for

Executive Secretary

9 FELI'S CARE HOME
10 _____

11
12 **STIPULATION FOR SETTLEMENT OF DISCIPLINARY ACTIONS**

13 WHEREAS, as more fully addressed below, the NEVADA STATE BOARD OF
14 EXAMINERS OF LONG TERM CARE ADMINISTRATORS, ("BOARD"), and RESPONDENT
15 OLIVIA PARNELL ("RESPONDENT" or "PARNELL") (collectively referred to as "the Parties"),
16 hereby enter into this Stipulation for Settlement of Disciplinary Actions as follows:

17 **Jurisdiction**

- 18
- 19 1. Pursuant to Nevada Revised Statute 654.110(1)(f), the BOARD has jurisdiction to
20 receive, investigate and take appropriate action with respect to any charge or
21 complaint filed with the BOARD against a licensee.
 - 22 2. RESPONDENT at all times relevant hereto, was and currently is, licensed in the
23 State of Nevada as a residential facility administrator ("RFA") by the BOARD,
24 pursuant to the provisions of Nevada Revised Statutes and Nevada Administrative
25 Code chapters 654.
 - 26 3. At all times relevant hereto, RESPONDENT was the Administrator of FELI'S HOME
27 CARE, 1042 Featherwood Ave., Las Vegas, NV 89015 ("the Facility"), License No.
28

5844, and as a result of such licensure, his/her conduct in the capacity of a licensee was and is governed by Nevada Revised Statutes Chapter 654, Nevada Administrative Code 654, and other provisions of Nevada law.

4. Pursuant to Nevada Revised Statute 233B.121(5), the BOARD is authorized to enter into a settlement agreement to resolve a disputed matter.

Allegations

5. On or about May 30, 2013, December 10, 2013 and January 16, 2014, the State of Nevada, Division of Public and Behavioral Health ("DPBH") conducted complaint investigations at Feli's Care Home, and subsequently DPBH issued its Statements of Deficiencies ("SOD") against the Facility.
6. On or about March 6, 2014, the BOARD sent a "Notice Pursuant to Nevada Revised Statutes ("NRS") 233B.127(3) of Intent to Take Administrative Action for Violations of Chapter 654 of NRS and Chapter 449 of NRS" to RESPONDENT, by certified mail, notifying him or her of an investigation concerning allegations of Chapter 654 violations.
7. On March 20, 2014, the Board sent correspondence to RESPONDENT, by certified mail, notifying RESPONDENT that sufficient evidence had been found for disciplinary action to be commenced, and that the BOARD proposed such action would be brought for an administrative hearing.
8. Respondent acknowledges that information has been received by the BOARD or its agent, which constitutes sufficient grounds for the initiation of an administrative hearing.
9. The Parties desire to resolve any disputed matters relating to the BOARD'S investigation, and recognize that continued litigation of this dispute would be protracted, costly and time consuming, and therefore, the Parties have reached a

settlement agreement in the interest of judicial and administrative economy.

Violations of Law

10. RESPONDENT admits that the conduct set forth in the DPBH survey and/or complaint investigation constitutes a violation of law regulating the practice of residential facility administrators and/or skilled nursing administrators. RESPONDENT has elected to enter into this settlement agreement rather than face the possibility of further disciplinary action by the BOARD.

Administrative Penalty

11. RESPONDENT shall complete 3 approved CEU hours on Resident Supervision and 4 approved CEU hours on Administrative Oversight, 4 approved CEU hours on Medication Management and 4 approved CEU hours on Plant Maintenance and submit the Certificates of Completion to the Board within thirty (30) days after the Effective Date of the Board's Final Order, and pay the following monetary assessment to the BOARD:

Administrative Fine:	\$	900.00
Administrative & Legal Costs:		<u>350.00</u>
Total Assessed:	\$	<u>1,250.00</u>

12. RESPONDENT shall pay to the BOARD the total sum of \$1,250.00, in twelve (12) installments consisting of the first payment being ten (10) percent of the total balance equaling \$125.03 and eleven (11) equal monthly installment payments \$102.27 thereafter.
13. The first payment of \$125.03 is due and payable within thirty (30) days after the EFFECTIVE DATE of the BOARD'S Final Order, with eleven (11) additional

limited to, complaints, preliminary investigations or prior disciplinary actions.

30. RESPONDENT hereby agrees to waive any rights she/he might have to challenge the impartiality of the BOARD to hear the disciplinary complaint, based on prior knowledge obtained by the BOARD through consideration of this settlement agreement, if after review by the BOARD, this settlement agreement is rejected.

31. If the BOARD does not accept the settlement agreement, it shall be regarded as null and void. Admissions by RESPONDENT in the settlement agreement will not be regarded as evidence against him at the subsequent disciplinary hearing. The RESPONDENT will be free to defend himself and no inferences against him will be made from his willingness to have entered into this agreement.

Complete Agreement

32. This settlement agreement consists of eight pages and embodies the entire agreement between the BOARD and RESPONDENT. It may not be altered, amended or modified without the express consent of the parties.

Date: 3-29-14

Date: _____
NEVADA STATE BOARD OF
EXAMINERS OF LONG TERM CARE
ADMINISTRATORS

By: 
Olivia Parnell
Licensee

By: _____
Sandy Lampert
Executive Director

**STATE OF NEVDA
BOARD OF EXAMINERS FOR LONG-TERM CARE ADMINISTRATORS**

Draft Minutes of Regular Quarterly Board Meeting

**February 6, 2014
9:00 a.m.**

**The Grant Sawyer State Office Building
555 East Washington Avenue
Room 4412
Las Vegas, Nevada 89101
and
Video Conferencing
Legislative Counsel Bureau
401 South Carson Street
Conference Room 3138
Carson City, Nevada 89701**

- I. Chair, Margaret McConnell called the meeting to order at 9:05 a.m.
- II. Executive Director, Sandy Lampert called the roll and a quorum was present.

Board Members:

Margaret McConnell, Chair	Mary Ellen Wilkinson, Vice Chair
Douglas Sinclair, Secretary/Treasurer	Lindsay Hansen, M.D.
Terry Clodt - Excused	Linda Gelinger
Jane Gruner, ADSD	

Staff:

Sophia G. Long, Esq. DAG	Sandy Lampert, Executive Director
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Guests:

Daniel Mathis, NVHCA	Jennifer Williams - ADSD
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III. PUBLIC COMMENTS

- IV. **APPROVAL OF THE FOLLOWING PROPOSED DISCIPLINARY ACTION****(Board may go into closed session) "for possible action"
 - a. Bradley Cheek – Pahrump Health & Rehab – Case No. B-36065
 - b. China West – Emeritus @ the Seasons – Case No. B-36073Chair, Margaret McConnell, asked for a motion. Mary Ellen Wilkinson motioned to approve Disciplinary Actions. Douglas Sinclair seconded. Motion carried.

- V. **APPROVAL OF THE FOLLOWING VOLUNTARY SURRENDER****(Board may go into closed session) "for possible action"
 - a. Regina Gasataya – JC Group Home 2 – Case No. B-36060/B-36068

Chair, Margaret McConnell, asked for a motion. Lindsay Hansen motioned to approve the Voluntary Surrender. Douglas Sinclair seconded. Motion carried.

VI. SECRETARY'S REPORTS:

a. Secretary, Douglas Sinclair, directed the Board to a copy of the minutes from the meeting of October 24, 2013. Chair, Margaret McConnell called for a motion. Mary Ellen Wilkinson moved to approve. Douglas Sinclair seconded. Motion carried.

VII. ADMINISTRATIVE REPORT - Executive Director, Sandy Lampert, reported that our website now allows users to look up a license. All licensed administrators are listed with the original license issue date and expiration date.

VIII. ADMINISTRATOR LICENSES ISSUED MUST RECEIVE FINAL BOARD APPROVAL WHEN ALL REQUIREMENTS HAVE BEEN MET.

a. Nursing Facility Administrator Licenses Issued

- (1) Wolfley, Ammon
- (2) Cook, Mitchell
- (3) Smith, Adam
- (4) Wolfley, Aaron

Chair, Margaret McConnell, called for a motion. Mary Ellen Wilkinson moved to approve the Nursing Facility Administrator Licenses. Jane Gruner seconded. Motion carried.

b. Residential Facility Administrator Licenses Issued

- (1) Lando, Michael
- (2) Saeed, Meshab
- (3) Peterson, Julie
- (4) Ramos, Faith
- (5) Weight, Tad
- (6) Taskov, Aleksandrina
- (7) Lapasaran, Alex
- (8) Cemensky, RaNae
- (9) Fulco, Anna Maria
- (10) Haack, Cher
- (11) Nall, Donna
- (12) Rogers, Lisa
- (13) Rush, Mary
- (14) VanDuisen, Lori
- (15) Anderson, Joan

Chair, Margaret McConnell, called for a motion. Douglas Sinclair moved to approve the Residential Facility Administrator licenses. Lindsay Hansen seconded. Motion carried.

c. Inactive Requests

- (1) Khan, Alaudin - RFA
- (2) Howie, Michael - RFA
- (3) Hansen, Marcia - RFA
- (4) Green, Martha - RFA
- (5) Cheek, Bradley - NFA
- (6) Reese, Andrew - NFA
- (7) Spencer, Sharon - RFA
- (8) Knorr, Wendy - RFA

- (9) Crespín, Juan – RFA
- (10) Sherzi, Patricia – NFA
- (11) Anatián, Desiree – RFA
- (12) Klick, Gregory - RFA

Chair, Margaret McConnell, called for a motion. Douglas Sinclair moved to approve the Inactive License Requests. Mary Ellen Wilkinson seconded. Motion carried.

VIX. UNFINISHED BUSINESS:

a. RCAL AIT Program Report – Rosemary Womack was unable to attend, but submitted a report indicating that 15 applicants have recently been licensed. Chair, Margaret McConnell, informed the members of the Board that we now oversee the Regulation Training, and that Executive Director, Sandy Lampert, has created a comprehensive program that will require all candidates to pass an exam. In addition, we are looking at our 100 hour RFA Introductory Course, and exploring additional avenues for its delivery. .

b. NFA lack of AIT Opportunities – Mary Ellen Wilkinson reported that she has been in conversations with Philip DuBois from St. Joe's who has an AIT program and has found ways to get corporate houses involved. Also, a NAB member has a private company that has been going after grants to support internships for AITs and Mary Ellen will look into this. She will be meeting with Peter Reed, the new director of the Sanford Center for Aging. Chair, Margaret McConnell, stated that the American College of Healthcare Administrators has put together a task force to work on the lack of mentors and AIT opportunities and find creative ways for a facility to take on an AIT since this is a nationwide problem.

IX. NEW BUSINESS:

a. The Board will be seeking nominations for candidates to attend the National Emergence Leadership Conference to be held at George Washington University in July. Last year the Board paid up to \$2,000.00 for the attendee.

b. Chair, Margaret McConnell, announced that the Board is now preparing a Position Paper to memorialize the history of the Board, discussing the Board's national presence and where the Board plans to move in the future.

c. Chair, Margaret McConnell, informed the Board that the Sunset Committee of the Legislative Board has selected a number of Boards for review, and BELTCA is one that will be considered for sunset.

d. The Board has a new Power Point presentation that Chair, Margaret McConnell, will use at the next meeting of the Nevada Silver Haired Committee.

X. DEPUTY ATTORNEY GENERAL'S REPORT – Sophia Long, Deputy Attorney General, informed the Board that there might be one hearing at the next meeting.

XI. BOARD MEMBER COMMENTS

XII. PUBLIC COMMENTS – Daniel Mathis of NVHCA informed the Board that the Perry Foundation will be opening a new website, and that NVHCA has established Quality Awards for skilled nursing facilities based on quality measures. NVHCA has been working with the state to create a quarterly data report that will be available on their website. The goal of the report is to find those facilities that are not doing well. Also the Perry Foundation is putting together a library for post acute providers. Chair, Margaret McConnell thanked NVHCA for providing training and CEUs for our licensees.

XIII. TIME/DATE/LOCATION OF NEXT REGULAR QUARTERLY MEETING – The next meeting will be held on Thursday, May 8, 2014 at 9:30 a.m.

XIV. ADJOURNMENT – Meeting was adjourned at 9:50 am.

Respectfully submitted:

Sandy Lampert

Sandy Lampert
Executive Director

.E.L.T.C.A. [mailto:beltca@beltca.nv.gov]

Sent: Friday, March 07, 2014 11:30 AM

To: Christensen, Cory

Subject: Cory Christensen - NFA Application

Dear Mr. Christensen:

Your background check revealed an incident that took place on August 26, 2010.

Please see item IV of our application below.

IV. PERSONAL HISTORY INFORMATION (All Applicants)

In order to protect the public and comply with the American Disabilities Act, please answer the following questions. If the response is yes, carefully read the information after each question and provide all necessary documentation. Your application will not be considered complete without it.

1. Has your license, registration or certification in any state ever been denied, revoked, suspended, reprimanded, fined, surrendered, restricted, limited or placed on probation? Yes _____ No _____

If the answer is yes, you must submit a detailed letter of explanation of the action, state where the action took place and the circumstances leading to the action and copies of records and orders from the agency that took the action identifying the allegations, action taken and current action status.

2. Have you ever, since attaining the age of 18 years, been charged, even if charges were dropped, or dismissed, or convicted of a criminal offense whether a felony, gross misdemeanor or misdemeanor, placed on probation, or granted deferred adjudication, pretrial diversion or had records sealed or expunged, or advised by an attorney that you do not have to list the conviction, in any jurisdiction? Yes _____ No _____

PLEASE NOTE: FAILURE TO FULLY AND COMPLETELY DISCLOSE ANY FORMER CHARGES, ARRESTS OR CONVICTIONS MAY RESULT IN DENIAL OF YOUR LICENSE.

If you have any question as to how to respond to this question, please call the Board Office at (702) 486-5445 for clarification.

If the answer is yes, you must submit the following:

- A detailed letter of explanation including date of offense, circumstances leading to arrest, conviction, sentence, additional convictions and current status of sentence.
- Copies of court documents identifying actual conviction and sentence
- A letter from parole/probation officer regarding compliance with requirements or copy of document identifying completion of sentence.
- A criminal history printout from a FBI fingerprint check.

Please respond at your earliest convenience.

Sandy Lampert

Sandy Lampert | Executive Director

State of Nevada | Board of Examiners for Long Term Care Administrators

3157 N. Rainbow Blvd. #313, Las Vegas, NV 89108

T: (702) 486-5445 | F: (702) 486-5439 | E: beltca@beltca.nv.gov

B.E.L.T.C.A.

From: Christensen, Cory
Sent: Friday, March 07, 2014 1:59 PM
To: B.E.L.T.C.A.
Subject: RE: Cory Christensen - NFA Application

Hi Sandy,

On August 26, 2010, while traveling southbound on I-5 in southern California, I was pulled over on suspicion of driving under the influence. I volunteered to take the breathalyzer and the result came back a .10% (over the limit.) Because of this, I pled no contest and received a conviction in November of 2010.

I was sentenced to probation (I will get the document which gives the exact length), ordered to complete an education program (which, if memory serves, lasted 10-12 weeks), and required to install a device in my car which required a clean breath test prior to start and then every 30 minutes or so of operation thereafter for 5 months. On completion of all of these requirements, my license restriction was lifted.

Obviously, I am ashamed of my poor decision to drive on that evening, but at least I learned a valuable lesson from it that has changed my life for the better. I am fortunate to have learned this lesson before my poor judgment could bring harm to anyone. I have had no further traffic violations of any kind since that time.

I am not sure where all of my documents are, but I will find them (or obtain copies from the court) and send them to you. As I am not aware of how to request and provide an FBI fingerprint criminal report, could you please advise me, so that I can obtain this and provide to you as well.

Thank you for your help, Sandy.

Sincerely,

Cory M. Christensen

.E.L.T.C.A. [<mailto:beltca@beltca.nv.gov>]

Sent: Friday, March 07, 2014 11:30 AM

To: Christensen, Cory

Subject: Cory Christensen - NFA Application

Dear Mr. Christensen:

Your background check revealed an incident that took place on August 26, 2010.

Please see item IV of our application below.

IV . PERSONAL HISTORY INFORMATION (All Applicants)

NEVADA STATE BOARD OF EXAMINERS
FOR
LONG TERM CARE ADMINISTRATORS
3157 N. Rainbow Blvd., #313
Las Vegas, Nevada 89108
Phone: (702) 486-5445
Fax : (702) 486-5439



RESIDENTIAL/NURSING FACILITY ADMINISTRATOR

APPLICATION FOR LICENSURE

(Applications must be printed or typed)

ALL APPLICATIONS FOR LICENSURE MUST BE COMPLETED WITHIN ONE (1) YEAR OF THE ORIGINAL DATE OF SUBMITTAL. APPLICATIONS NOT COMPLETED WITHIN ONE (1) YEAR WILL BE CONSIDERED VOID.

I. APPLICANT IDENTIFYING INFORMATION

PLEASE CHECK ONE:

RESIDENTIAL FACILITY ADMINISTRATOR _____ NURSING FACILITY ADMINISTRATOR X

1. Name Christensen Cory Maxwell
Last/Family First/Given Middle Maiden
2. Other Names Used _____ Mother's Maiden Name Maxwell
First
3. Social Security Number _____ 4. Telephone No. Home _____
5. Business Telephone No. _____ 6. Cell Phone: _____
7. Personal E-mail: corchristensen@ensigngroup.net
8. Address 469 Anacapa Drive Roseville CA 95678
Number/Street Apartment # City State Zip
9. Date of Birth _____ 10. Place of Birth Salt Lake City, UT United States Citizen? Yes X No _____

II. RECORD OF LICENSURE INFORMATION

Licenses/Certificates: List all licenses, registrations or certifications issued by any state, province or country you now hold, in any capacity, in any jurisdiction (Example: RN, LPN, etc.)?

License Type	State	License/Certificate Number	Active/ Inactive Disciplined	By Exam or Endorsement	Expiration Date
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____

4. Have you failed a NAB Residential/Nursing Facility Administrator's Exam in any other state? Yes _____ No X

If yes, how many times? _____ In what state? _____

5. Do you have difficulty reading or writing English without assistance? Yes _____ No X

III. ONLY NURSING FACILITY ADMINISTRATOR APPLICANTS MUST COMPLETE THE FOLLOWING

Have you completed at least 1,000 hours in a program for training administrators and/or an internship or residency in a facility providing long-term care approved by a Board of Licensure for Nursing Facilities Administrators?
X Yes _____ No

If YES, provide the name and address of the program, a description of the course outline and a copy of transcripts or certificate received.

(see attached)

IV. PERSONAL HISTORY INFORMATION (All Applicants)

In order to protect the public and comply with the American Disabilities Act, please answer the following questions. If the response is yes, carefully read the information after each question and provide all necessary documentation. Your application will not be considered complete without it.

1. Has your license, registration or certification in any state ever been denied, revoked, suspended, reprimanded, fined, surrendered, restricted, limited or placed on probation? Yes _____ No X

If the answer is yes, you must submit a detailed letter of explanation of the action, state where the action took place and the circumstances leading to the action and copies of records and orders from the agency that took the action identifying the allegations, action taken and current action status.

2. Have you ever, since attaining the age of 18 years, been charged, even if charges were dropped, or dismissed, or convicted of a criminal offense whether a felony, gross misdemeanor or misdemeanor, placed on probation, or granted deferred adjudication, pretrial diversion or had records sealed or expunged, or advised by an attorney that you do not have to list the conviction, in any jurisdiction? Yes _____ No X

PLEASE NOTE: FAILURE TO FULLY AND COMPLETELY DISCLOSE ANY FORMER CHARGES, ARRESTS OR CONVICTIONS MAY RESULT IN DENIAL OF YOUR LICENSE.

If you have any question as to how to respond to this question, please call the Board Office at (702) 486-5445 for clarification.

If the answer is yes, you must submit the following:

- A detailed letter of explanation including date of offense, circumstances leading to arrest, conviction, sentence, additional convictions and current status of sentence.
 - Copies of court documents identifying actual conviction and sentence
 - A letter from parole/probation officer regarding compliance with requirements or copy of document identifying completion of sentence.
 - A criminal history printout from a FBI fingerprint check.
3. Within the past five years have you been diagnosed, treated or hospitalized for a psychiatric or mental health condition that could/may result in your not being able to practice the essential job functions of a Residential/Nursing Facility Administrator?
Yes _____ No X

If the answer is yes you must submit the following:

- A detailed letter of explanation including diagnosis, past treatment efforts (inpatient or outpatient), date of last treatment and current treatment plan.
 - Documentation from treating practitioners regarding diagnosis (Axis I - V), medications, treatment modality, treatment plan, current mental status and statement regarding ability to function, cope with a stressful situation or reason and make sound judgments.
4. Within the past five years have you been diagnosed as having a physical or medical condition which will result in your not being able to practice the essential job function of a Residential/Nursing Facility Administrator?
Yes _____ No X

If the answer is yes you must submit the following:

- A detailed letter of explanation of the condition and how it may interfere with your ability to practice.
- A letter from your treating practitioner regarding diagnosis, extent of the condition and your ability to practice.

A "YES" ANSWER TO ANY OF THE ABOVE QUESTIONS WILL AFFECT THE PROCESSING OF YOUR APPLICATION AND MAY RESULT IN ISSUING AN UNRESTRICTED, LIMITED OR RESTRICTED LICENSE. FAILURE TO ANSWER TRUTHFULLY IS GROUNDS FOR A FRAUDULENT APPLICATION AND MAY RESULT IN DISCIPLINARY ACTION.

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES
MISDEMEANOR SENTENCING MEMORANDUM - VEHICLE CODE

Defendant: <u>CHRISTENSEN</u>		Case No. <u>DWWD6178</u>	
Date: <u>11-4-10</u>	Dep't/Div. <u>5</u>	Prosecutor:	Defense: <u>PP</u>
Judge:	Clerk:	Reporter:	Interpreter/Language:

As to Count 2, a violation of Vehicle Code § 23152(a)(b) [] 23103 per 23103.5 [] 14601 [] 12500(a) [] with admitted priors.

Arraignment For Judgment

☒ Arraignment for judgment and time for sentencing waived. There is no legal cause why judgment should not now be pronounced.

Sentence

1. ☐ Probation is denied. Defendant is to serve days/hours in the Los Angeles County Jail forthwith [] consecutive [] concurrent with Defendant to receive total credit of days/hours (credit days/hours actual plus days GT/WT).
2. ☐ Pay a fine of \$ plus all applicable penalty assessments and enhancements.
3. ☐ Pay all fines and assessments as set forth in paragraph 20 below.
4. ☐ Execution of the foregoing sentence is suspended, on the following terms and conditions.

Conditional Sentence (PC §1203b) Order of Probation (PC §1203a)

☒ Imposition of sentence is suspended (ISS) [] With supervision by county probation officer (formal probation)

For a period of 3 months upon the following terms and conditions:

1. ☐ Serve days/hours in the Los Angeles County Jail, [] consecutive [] concurrent with
 Defendant to receive credit of days/hours actual plus days/hours GT/WT. [] Time may be served in any penal institution.
☐ Time may be served on consecutive weekends of two days each beginning (772)
☐ Time may be served in any city jail having actual confinement, at defendant's expense. (021)
☐ Defendant may not participate in Sheriff's home detention/EHM per PC 1203.016(e). (771) [] Work furlough / early release not allowed.
☐ Last days of jail time to be served in: [] Antelope Valley Rehabilitation Center [] Program. (002)
 Defendant to be released only to an authorized representative of that program and is to comply with all program terms and conditions. (013)
 If defendant leaves or is discharged from the program prior to completion, defendant is to report to court on the next court day. (013)

☒ Pay a fine of \$ 390 plus penalty assessments or in default thereof serve additional days in County Jail, consecutive or perform days of Community Labor/ or perform days/hours of approved Community Service, with credit for days actual or \$ 30 towards fine for jail time already served. [] Fine may be paid in monthly installments of \$. (124) [] Defendant to report to Financial Evaluator to work out a payment plan.
☐ Defendant elects jail in lieu of fine, forthwith, consecutive to all other time, credit days actual plus days GT/WT.

3. ☐ Perform days of work for Community Labor/ or perform days/hours of approved Community Service, with credit for days actual. Sign up for all work or Community Service only at a court-approved volunteer center or the clerk's office.
 Failure to complete court-ordered work or Community Service without excuse may result in jail. This work or Community Service is in addition to that done in lieu of the fine.

4. ☐ Make restitution to victim per PC §1202.4(f). (048) [] in an amount to be determined at a hearing. (067) [] Harvey waiver taken.
☐ in the stipulated sum of \$. (048) [] per any final civil judgment against you. (100) [] Liability is admitted, but amount is disputed.

5. ☒ Enroll within 21 days (or within 21 days from your release from custody) and successfully complete an approved: Defendant's BAC: 1.5 %. [] Refusal [] 12 hour (SB 1176) 3 mo. (AB541) (327) [] 6 mo. (AB 768) [] 9 mo. (AB1353) [] 18 mo. (SB38) (328) [] 30 mo. alcohol education program.
 The DMV will not restore your driving privilege until you successfully complete a licensed alcohol education program. [] Obtain program details Clerk or Health Officer.

6. ☐ Attend Alcoholics Anonymous/Narcotics Anonymous meetings at the rate of times per week, IN ADDITION to those required as part of the alcohol education program. (246)

7. ☒ Do not drive any vehicle with any measurable amount of alcohol or drugs in your blood, or refuse to take and complete any blood alcohol/drug chemical test, any field sobriety test or any preliminary alcohol screening test when requested by any peace officer. (711)

8. ☒ Do not drive a motor vehicle without a valid driver's license in your possession, or without liability insurance in at least the minimum amounts required by law. (374)

9. ☐ Abstain from the use of all alcoholic beverages and stay out of all places where they are a chief item of sale. (300)

10. ☐ Enroll in and complete the [] Hospital and Morgue ("HAM") Program. (471) [] MADD Victim Impact Program (472) []

11. ☐ The court finds that defendant presents a traffic safety or public safety risk and, per VC §13352.4 (d), disallows issuance by DMV of a restricted license. (249)

12. ☐ Your driver's license is hereby ordered [] suspended [] revoked for a period of months years. [] "M" service given in open court. (283)

You may not drive a motor vehicle unless and until your driving privilege is restored. [] Defendant under age 21 at time of offense.

13. ☐ You are hereby declared to be a Habitual Traffic Offender for a period of years. (263) PERMANENT ORDER

14. ☐ Comply with the "Supplemental Terms of Probation - Ignition Interlock Device" regarding installation of an Ignition Interlock. (248)

15. ☐ Do not own, use, possess, buy or sell any controlled substances, or associated paraphernalia, except with valid prescription, and stay away from places where users, buyers or sellers congregate. Do not associate with persons known by you to be controlled substance users or sellers, except in an authorized drug counseling program. (926)

16. ☐ Submit your person and property to search and seizure at any time of the day or night, by any Probation Officer or other peace officer, with or without a warrant, probable cause or reasonable suspicion. (576)

17. ☐ The vehicle with license plate is, after notice and hearing, ordered impounded for days per Vehicle Code § 23594(a). (703)

18. ☐ The vehicle with license plate is, after notice and hearing, ordered confiscated and sold per Vehicle Code § 23596(a).

19. ☐ If you are deported from or otherwise leave the United States, notify the Court (and Probation) in writing of your address and telephone number outside the United States within 72 hours of deportation or departure. Continue to pay all of your financial obligations to the Court (and to Probation) while outside the United States. (474)

20. ☐ Pay all of the following (check all that apply):

- | | |
|--|---|
| <input checked="" type="checkbox"/> A restitution fine of \$100.00. [] \$ <u> </u> per PC §1202.4(b) through (e). (098)
<input checked="" type="checkbox"/> A probation revocation restitution fine in the same amount as the restitution fine, per PC §1202.44, payment is stayed until probation is revoked and sentence imposed.
<input checked="" type="checkbox"/> A criminal conviction/facilities assessment of \$30.00 per Gov't Code §70373(a). (SA:CC)
<input checked="" type="checkbox"/> A criminal fine surcharge of \$ <u> </u> per Penal Code §1465.7 (20% of base fine). (SA:AB)
<input checked="" type="checkbox"/> A court security fee of \$20.00 per PC §1465.8(a)(1). (per count) (SA:SF)
<input type="checkbox"/> A criminal justice administration fee of \$ <u> </u> payable to the local arresting agency, per Gov't Code §§ 29550(c), 29550.1 or 29550.2 (agency's actual cost).
<input type="checkbox"/> Cost of probation services per PC §1203.1b. [] as determined by the Probation Officer, subject to a hearing if requested [] in the amount of \$ <u> </u> per month. | <input type="checkbox"/> An administrative screening fee of \$25.00 per PC 1463.07/GC §29550(f) (D released OR.)
<input type="checkbox"/> A citation processing fee of \$10.00 per PC §1463.07 and GC §29550(f) (If D cited and released in field or at jail facility.)
<input type="checkbox"/> An alcohol abuse education and prevention penalty assessment of \$ <u> </u> (\$50 max.) per VC §23645
<input type="checkbox"/> An alcohol and drug problem program assessment of \$ <u> </u> (\$100.00 max.) per VC §23649.
<input type="checkbox"/> A drug program fee of \$150.00 (per drug count except §11357(b)) per H&S §11372.7(a).
<input type="checkbox"/> A crime lab fee of \$50.00 plus penalty assessment per H&S Code §11372.5. (184) |
|--|---|

21. ☐ WATSON

IF DEFENDANT FAILS TO COMPLY WITH TERMS AND CONDITIONS OF PROBATION, PROBATION REVOKED, BENCH WARRANT TO ISSUE, BAIL \$ 300

22. ☒ Obey all laws and orders of the Court. (541) [] and rules and instructions of the Probation Department. (542)

☒ Defendant acknowledges that he/she understands and accepts the terms and conditions of probation. (810)

☐ Defendant ordered to pay attorney fees [] in the amount of \$ [] in the amount determined by the Financial Evaluator.

☒ Counts/allegations are dismissed/stricken on the People's motion pursuant to Penal Code Section 1386 as to this defendant.

Compliance Dates: Defendant is ordered to appear in person on each of the following compliance dates. (683)

Surrender for jail: <input type="checkbox"/> Cruz waiver taken:	Restitution Hearing in Div./Dep't <u> </u> at 8:30a.m.
Pay fines/fees in full by: <input type="checkbox"/> Installments allowed	POE/Proof of Completion of Alcohol Program: <u>11-4-11</u> <u>5-4-11</u>
Complete jail/work/s by:	Other: <u>12-9-10</u>

I understand, accept and will comply with the foregoing conditional sentence and compliance dates and will return to Court as ordered.

Defendant's Signature: _____	Attorney's Signature Joining: _____
------------------------------	-------------------------------------

Defendant's Address: _____
 Defendant's Telephone: _____

County of Orange, Health Care Agency, Court Liaison Services
PROGRESS STATUS-DISCHARGE REPORT
BRING THIS WITH YOU TO COURT

Name: CHRISTENSEN, CORY MAXWELL
Sex: M
Address: 469 ANACAPA DRIVE
ROSEVILLE, CA 95678

Date: 02/22/2011 Cost Ctr # 15157602
Court: LOS ANGELES CO. - WHITTIER
Case #: DWW06178
Enrollment Date 11/19/2010
Provider Name: A. O. D. D.
Facility: San Juan Capistrano
Phone: 949-240-0115

Type of Discharge: ☒ COMPLETED ☐ TERMINATED OTHER, specify _____

Type of service at admission: 3-Month Program

Fee: ☒ Full ☐ Partial ☐ None Discharge number: 1st ☒ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐

IF TERMINATED

PLEASE TAKE NOTICE that your participation in the Program has been suspended and your case returned to court, pursuant to California Administrative Code or State/County approved rules and requirements.

If appropriate, a notice of non-compliance has been filed with the Department of Motor Vehicles pursuant to law.

Program Violations and/or Deficiencies

- | | |
|---|---|
| <input type="checkbox"/> Failure to Commence Treatment | <input type="checkbox"/> Failure to Complete Transfer |
| <input type="checkbox"/> Failed to return from leave of absence | <input type="checkbox"/> Excessive Absenteeism Dates: _____ |
| <input type="checkbox"/> Subsequent Drug/Alcohol conviction | <input type="checkbox"/> Failure to maintain program sobriety |
| <input type="checkbox"/> Uncooperative Attitude | <input type="checkbox"/> Test positive on Alcohol/Drug test |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Forged Court Card |

Specific Problem Stated: _____

RECOMMENDATIONS

RECOMMENDED ACTIONS: ☐ Reinstatement in Program ☐ Do not reinstate
☐ Reinstatement with additional requirements

PROGRAM REQUIREMENTS TO DATE:	No. Required	No. Attended	Needs to complete
Group Sessions	10.00	10.00	0.00
Individual Counseling Sessions	0.75	0.75	0.00
Alcohol Education	20.00	20.00	0.00
Self-Help Meetings	0.00	N/A	0.00
Re-Entry Sessions	0.00	N/A	0.00

PROGRAM CERTIFICATION

Program Director: ANDREA ALVARADO, ADMIN. Signature:  Date: 02/28/2011



NOTICE OF COMPLETION CERTIFICATE

DL 101

NAME (LAST, FIRST MIDDLE, SUFFIX) CHRISTENSEN, CORY MAXWELL		NUMBER	
ADDRESS (STREET) 469 ANACAPA DRIVE	(CITY) ROSEVILLE	(STATE) CA	(ZIP CODE) 95678
The above named individual has successfully completed a Driving-Under-the-Influence Program licensed by the California Department of Alcohol and Drug Programs to provide the following services: <input type="checkbox"/> Education Component Only (23140 CVC Conviction) 1st Offender Program 03 months			
Multiple Offender Program <input type="checkbox"/> 12 months <input type="checkbox"/> 18 months <input type="checkbox"/> 30 months <input type="checkbox"/> Multiple Offender Program (IID restriction only) _____ months of _____ months			
DATE OF ENROLLMENT 11/19/2010	DATE OF COMPLETION 02/22/2011	VIOLATION DATE 08/26/2010	COURT CODE 19490
PROGRAM NAME Academy Of Defensive Driving, Inc.		DOCKET NUMBER DWW06178	
PROGRAM ADDRESS (STREET) 31726 Rancho Viejo Road, Suite 120		ADP LICENSE NUMBER 3000301120	
(CITY) San Juan Capistrano		(STATE) CA	(ZIP CODE) 92675
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
DATE 03/01/2011	PARTICIPANT'S SIGNATURE X	TELEPHONE NUMBER (916) 748-0269	
AUTHORIZED PROGRAM REPRESENTATIVE'S PRINTED NAME Marsha Peckham		AUTHORIZED PROGRAM REPRESENTATIVE'S SIGNATURE X	TELEPHONE NUMBER (949) 240-0115

INSTRUCTIONS TO PROVIDER: Print the appropriate number of copies, apply the signatures (program representative and participant), retain a copy, and distribute to participant and court.

NOTE: Before a restriction is processed, Proof of Financial Responsibility and reissue fee payment must be received.

This Notice of Completion Certificate is a facsimile of electronically transmitted information. Any copy printed for court, participant or record keeping is not valid for DMV purposes.