



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

October 24, 2013

**CERTIFIED MAIL 7007 1490 0003 4201 6101**

Administrator  
Olympic Alzheimer's Residence  
A Prestige Expressions Community  
3025 14<sup>th</sup> Avenue NW  
Gig Harbor WA 98335

Assisted Living Facility License #1610  
Licensee: Gig Harbor Ventures LLC

**IMPOSITION OF CONDITIONS ON A LICENSE**

Dear Administrator:

On October 15, 2013, the Department of Social and Health Services (DSHS), Residential Care Services conducted an inspection/investigation at your facility. This letter constitutes formal notice of conditions on the license for your assisted living facility, also known as **Olympic Alzheimer's Residence, A Prestige Expressions Community**, located at **3025 14<sup>th</sup> Avenue NW, Gig Harbor**, 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 conditions on the license is based on the following violation of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated **October 15, 2013**.

**WAC 388-78A-2210(1)(b) Medication services.**

**The licensee failed to ensure a medication system was developed and implemented for safe delivery of routine and as needed medications for two residents related to establishing specific time frames for routine medications and specific intervals for giving as needed medications. This is a repeat violation of deficiencies cited on July 5, 2011, March 12, 2013, and June 6, 2013.**

***NOTE: This is the violation which resulted in a/the conditions on the license; see the attached Statement of Deficiencies for any additional violations.***

The department has determined that the following conditions shall be placed on your adult family home license, effective October 24, 2013:

- *By November, 4, 2013, the facility will hire, at their own expense, an RN consultant to review the policies and staff practice related to delivery of medications during 'windows of opportunity'.*
- *The consultant will train medication technicians and facility staff on knowing safe delivery of as needed and other medications affecting the mentation of residents.*
- *The consultant will review all falls in the past six months to determine if as needed or untimely delivery of medications may have contributed to falls.*
- *The consultant will assist the licensee to develop individualized non-psychopharmacological interventions included in the negotiated service agreement.*
- *The licensee must post this Notice of Conditions with the license in a visible location in a common use area.*

### **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 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:**

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- 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

Formal Administrative Hearing

You may contest the conditions on the license by requesting a formal administrative hearing to challenge the deficiency which resulted in the conditions on the license. **All hearing requests must be in writing and include:**

- A copy of this letter; and
- A copy of the Statement of Deficiencies.

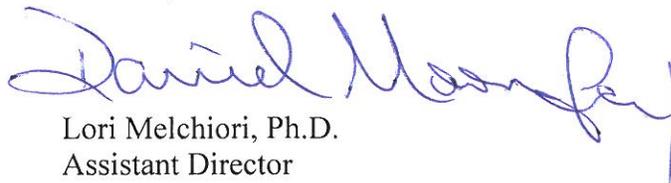
**The written request must be received within twenty-eight (28) calendar days of receipt of this letter.**

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

Administrator  
Olympic Alzheimer's Residence  
A Prestige Expressions Community  
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Enclosure

cc: David Moon, Compliance Specialist  
Field Manager, District 3, Unit A  
RCS District Administrator, District 3  
HCS District Administrator, District 3  
WA LTC Ombuds  
Judy Plesha, HCS  
BAM

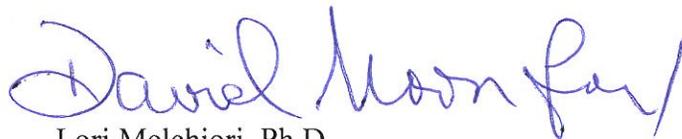
# NOTICE OF CONDITIONS ON LICENSE

October 24, 2013

Based on the Statement of Deficiencies dated October 15, 2013, the Department of Social and Health Services imposes the following conditions on the license of *Olympic Alzheimer's Residence, A Prestige Expressions Community, License #1610, located at 3025 14<sup>th</sup> Avenue, Gig Harbor, Washington.*

- *By November, 4, 2013, the facility will hire, at their own expense, an RN consultant to review the policies and staff practice related to delivery of medications during 'windows of opportunity'.*
- *The consultant will train medication technicians and facility staff on knowing safe delivery of as needed and other medications affecting the mentation of residents.*
- *The consultant will review all falls in the past six months to determine if as needed or untimely delivery of medications may have contributed to falls.*
- *The consultant will assist the licensee to develop individualized non-psychopharmacological interventions included in the negotiated service agreement.*
- *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 October 24, 2013, and remain in effect until lifted by formal Department of Social and Health Services notice.



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