



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

July 31, 2014

CERTIFIED MAIL 7007 1490 0003 4302 5393

Administrator
Columbia Heights Retirement and Assisted Living Community
3425 Boone Road SE
Salem, OR 97317

Assisted Living Facility License #1710
Administrator: Donald Trump Jr.

IMPOSITION OF CIVIL FINES

Dear Mr. Trump:

On July 15, 2014, the Department of Social and Health Services (DSHS), Residential Care Services completed an inspection/investigation at your facility. This letter constitutes formal notice of civil fines on the license for your assisted living facility, also known as **Columbia Heights Retirement and Assisted Living Community**, located at 1550 Cherry Street, **Wenatchee**, 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 are based on the following violations of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated **July 15, 2014**.

WAC 388-78A-2160 – Implementation of negotiated service agreement.

\$300.00

The licensee failed to ensure that one resident who relied on staff to meet their needs was provided the care and services as agreed upon in the Negotiated Services Agreement (NSA).

This is a repeat deficiency from February 12, 2013.

WAC 388-78A-2450(2)(e) – Staff.

\$100.00

X Five Staff = \$500.00

The licensee failed to ensure five staff hired was qualified to provide the care and services each resident wanted and needed.

This is a repeat deficiency from February 12, 2013.

WAC 388-78A-2474(2)(a)(b)(3) – Training and home care aide certification requirements.

\$100.00

The licensee failed to ensure one staff member received the required necessary specialty trainings.

This is a repeat deficiency from September 29, 2011.

WAC 388-78A-2630(1)(a) – Reporting abuse and neglect.

\$300.00

The licensee failed to ensure staff members notified the department's Complaint Resolution Unit/hotline for three incidents.

This is a repeat deficiency from May 21, 2013.

WAC 388-78A-2700(2)(c)(i)(ii) – Safety measures and disaster preparedness.

\$100.00

The licensee failed to investigate and document investigative actions and findings for an incident for one resident.

This is a repeat deficiency from November 18, 2011, May 14, 2012 and September 15, 2012.

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.

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Return the signed and dated SOD to:

Robert Gutierrez, Field Manager
3611 River Road, Suite 200
Yakima, WA 98902
Telephone: (509) 225-2813
Fax: (509) 574-5597 or (509) 454-7890

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).

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 civil fines by requesting a formal administrative hearing to challenge the deficiencies 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.

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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 **\$1,300.00** payable to the 'Department of Social and Health Services' at:

DSHS Office of Financial Recovery
PO Box 9501
Olympia, Washington 98507-9501

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 Robert Gutierrez, Field Manager at (509) 225-2813.

Sincerely,

Linda Ronco
for Bett Schlemmer, RN, MN, MPA
Interim Assistant Director
Residential Care Services

Enclosure

cc: Linda Ronco, Compliance Specialist
Field Manager, District 1, Unit D
RCS District Administrator, District 1
HCS District Administrator, District 1
DDA District Administrator, District 1
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
Valentina Karnafel, HCS
NDL