



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

October 11, 2016

CERTIFIED MAIL 7008 1300 0000 7187 4796

Administrator
Discovery Memory Care
408 West Washington Street
Sequim WA 98382

Assisted Living Facility License #1935
Licensee: HSP Investments II LLC

STOP PLACEMENT ORDER PROHIBITING ADMISSIONS

Dear Administrator:

On September 23, 2016, the Department of Social and Health Services (DSHS), Residential Care Services conducted an inspection/investigation at your facility. This letter constitutes formal notice of a stop placement order prohibiting admissions for your assisted living facility, located at **408 West Washington Street, Sequim**, 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 stop placement order prohibiting admissions was effective per verbal notification to you on **October 11, 2016**, and certified mail receipt of this letter with the attached Statement of Deficiencies dated **September 23, 2016**.

WAC 388-78A-2090 Full assessment topics.

The licensee failed to ensure that nine residents had completed full assessments to include medications. Also, the licensee failed to assess two residents for the ability to safely use bedside rails.

WAC 388-78A-2100 On-going assessments.

The licensee failed to ensure two residents were assessed after changes in their conditions or their service plans no longer reflected their needs.

WAC 388-78A-2210 Medication services.

The licensee failed to ensure that six residents received their medications as prescribed and received their medications in a safe manner.

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WAC 388-78A-2240 Nonavailability of medications.

The licensee failed to ensure a resident had two scheduled medications refilled.

WAC 388-78A-2450 Staff.

The licensee failed to ensure sufficient staff were available to meet the needs of all residents, and specifically two residents who required assistance with meals and frequent repositioning related to pressure ulcers.

This an uncorrected citation from June 9, 2015 and July 2, 2015.

NOTE: These are the violations which resulted in the stop placement order; see the attached Statement of Deficiencies for any additional violations.

The stop placement order prohibiting admissions to your assisted living facility is effective immediately upon verbal notice to you on **October 11, 2016**, and certified mail receipt of this letter and the attached Statement of Deficiencies report. The stop placement order prohibiting admissions will not be postponed pending an administrative hearing or informal dispute resolution process, as is required by RCW 18.20.190(4). The stop placement applies to all new admissions, re-admissions, and transfer of residents.

During the stop placement, you may not admit any new resident to your assisted living facility. In addition, you may not allow any resident who was absent from the home due to a temporary non-out-patient stay (not including out-patient treatment) at a hospital, nursing home or other treatment center to return during the stop placement unless you obtain advance approval from the department. You may request such approval by contacting Chris Cornell, Field Manager at (360) 664-8421.

Because it may not be possible to reach the Field Manager on a weekend or holiday, any pre-approval requests should be made as soon as possible during the business week. Such exceptions are made at the sole discretion of the department on a case-by-case basis. The department may impose sanctions or take other legal action if you fail to comply with the stop placement of admissions.

The department will terminate the stop placement order prohibiting admissions when the violations necessitating the stop placement have been corrected and you exhibit the capacity to maintain adequate care and service.

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:

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Chris Cornell, Field Manager
Region 3, Unit D
PO Box 45819
Tumwater WA 98504
Phone: (360) 664-8421 / Fax: (360) 664-8451

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 stop placement order by requesting a formal administrative hearing to challenge the deficiencies which resulted in the stop placement order. **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

If you have any questions, please contact Chris Cornell, Field Manager at (360) 664-8421.

Sincerely,



Dina Longen-Grimes
Compliance Specialist
Residential Care Services

Enclosure

cc: Field Manager, Region 3, Unit D
RCS Regional Administrator, Region 3
HCS Regional Administrator, Region 3
DDA Regional Administrator, Region 3
WA LTC Ombuds
HQ Central Files
bam