



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

November 12, 2013

**CERTIFIED MAIL 7007 1490 0003 4201 6453**  
**Amended Letter/Changes in Bold Italic**

Administrator  
Cedar Ridge Retirement & Assisted Living Community  
c/o 3220 State Street, Suite 200  
Salem OR 97301

Assisted Living Facility License #1951  
Licensee: Cedar Ridge Retirement & Assisted Living Community LLC

**IMPOSITION OF CIVIL FINES AND**  
**IMPOSITION OF CONDITIONS ON A LICENSE**

Dear Administrator:

This letter constitutes formal notice of the imposition of a civil fine and conditions on the license for your assisted living facility, located at 9515 198<sup>th</sup> Avenue East, Bonney Lake, by the State of Washington, Department of Social and Health Services, pursuant to Laws of 1998, Chapter 272 and RCW 18.20.190.

The civil fine and conditions on the license is based on the following violations of the Revised Code of Washington (RCW) and/or the Washington Administrative Code (WAC) found by the department in your assisted living facility. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on September 23, 2013.

<u>WAC 388-78A-2160 Implementation of negotiated service agreement.</u>	<u>\$450.00</u>
<u>\$100.00 x 4 residents with actual harm</u>	
<u>\$50.00 x 1 resident with potential harm</u>	

The licensee failed to ensure the negotiated service agreements for five residents were accurate and were implemented by the facility regarding inadequate toileting assistance, blood sugar levels, blood pressures and pulse rates not being monitored by the facility staff, lack of

proper staff response during resident low blood sugar episodes, medical providers not being notified when resident blood sugar levels and blood pressures were out of acceptable range.

WAC 388-78A-2210(1)(a)(b)(2)(a)(b) Medication services. \$3,100.00  
\$100.00 x 5 residents impacted by system failure  
\$50.00 x 52 residents with potential to be impacted by system failure

The licensee failed to implement systems that support and promote safe medication service for five residents by inaccurate charting of medications, not correctly accounting for narcotic medications, and not ensuring that residents received their medications as prescribed. This is a repeat violation of deficiencies cited on April 5, 2011.

WAC 388-78A-2240 Nonavailability of medications. \$400.00  
\$100.00 x 4 residents

The licensee failed to have medications available, as ordered, for four residents.

WAC 388-78A-2320(1)(a)(b)(2)(a)(b) Intermittent nursing services systems. \$600.00  
\$100.00 x 6 residents

The licensee failed to develop and implement systems that support and promote the safe practice of nursing for each resident through nurse delegation services for four residents who were not delegated for nursing tasks they were receiving from unlicensed staff and two residents that had incomplete paperwork for nurse delegation tasks. In addition, the licensee failed to ensure that three staff performing nursing tasks had the necessary training credentials to be nurse delegated.

WAC 388-78A-2410(8)(a)(i-iv)(b) Content of resident records. \$1,000.00  
\$100.00 x 10 residents

The licensee failed to maintain complete resident records for 10 residents related to care delivery, blood sugars values, blood pressure and pulse checks, medications given, and nurse delegation records for delegated care specific to each resident.

WAC 388-78A-2450(2)(c)(e)(3)(d)(i)(A)(C)(D)(E)(ii) Staff. \$600.00  
\$100.00 x 6 staff

The licensee failed to ensure 6 staff had the certifications required for their positions and their credentials were current and in good standing. Additionally, the licensee failed to ensure that all the required staff documents were available for review on the boarding home premises.

WAC 388-78A-2560(1)(2)(4) Administrator responsibilities. \$3,100.00  
\$100.00 x 5 residents with actual harm  
\$50.00 x 52 residents with potential of harm.

The licensee failed to ensure that the previous administrator was operating the facility to protect 57 vulnerable residents from misappropriated property, seeing that they received their medications, seeing that staff carried out service plans to meet residents assessed and care plan needs, seeing that resident records were in order, seeing that resident physicians know about their monitored blood levels, seeing residents received adequate toileting assistance and call lights answered, seeing that resident allegations were addressed immediately and state and local law enforcement were informed, seeing family are informed of condition changes, seeing that background screening was done and the staff had appropriate credentials and qualifications and seeing that staff were carrying out their assigned duties and ensuring that the facility was in compliance with the Assisted Living Facility laws and regulations.

WAC 388-78A-2630(1)(a) Reporting abuse and neglect. \$500.00  
\$100.00 x 5 residents

The licensee failed to report to the state hotline a theft of money for a resident and delayed reporting theft of possessions and money for residents and possible drug diversion.

WAC 388-78A-2640(1)(a-c) Reporting significant change in a resident's condition. \$100.00

The licensee failed to contact a resident's family as soon as possible when the resident was sent to the hospital for evaluation.

WAC 388-78A-2700(2)(c)(i-iii) Safety measures and disaster preparedness. \$900.00  
\$100.00 x 9 residents

The licensee failed to thoroughly investigate and document investigative actions including determining circumstances of incidents, putting plans in place to prevent similar future situations from occurring for incidents of thefts for five residents, and fall incidents for three residents, and an incident of possible drug diversion for one sample resident by a staff member.

The department, based on the findings of the inspection, has determined that the following conditions shall be placed on your license:

- *By October 11, 2013, the licensee must have all corporate staff assigned to the building for oversight, the Executive Director, direct and indirect staff, and other staff in the home, current and future, complete the online Mandatory Reporter Training located at <http://www.adsa.dshs.wa.gov/APS/training>.*
- *By October 18, 2013, the licensee, at own expense, must hire a consultant, not currently associated with the licensee and its corporation, to provide onsite training to all corporate staff assigned to the building for oversight, the Executive Director, direct and indirect staff, and other staff in the home, current and future, on the below topics. The training will be completed by October 25, 2013:*

- *Be in compliance and implement state Assisted Living Facility (ALF) laws and rules WAC 388-78A-2630, WAC 388-78A-2700 .*
- *Consistently prevent, recognize, report, and protect each resident from all types of abuse, neglect, mistreatment, restraints, involuntary seclusion, abandonment, financial exploitation, and misappropriation of property.*
- *Recognize key risk factors that may place residents at greater risk for abuse, neglect, financial exploitation, misappropriated property and theft.*
- *Take all prompt and necessary actions to protect residents following allegations of abuse, neglect, financial exploitation, and theft.*
- *Carry out facility and individual staff responsibilities as mandatory reporters.*
- *Report to the department hotline and local law enforcement as required by law.*
- *Incorporate and implement the ALF Guidebook: Prevention & Protection, Incident Identification, Investigation, and Reporting as guidelines for practice*
- *Assist the licensee and facility management to evaluate its system within the building to protect resident personal property and create a safe system that protects resident property and prevents theft.*
- *Assist the licensee and facility management to create a system to monitor compliance with regulatory requirements for timely investigation and reporting of, and protection of residents from, and prevention of, resident abuse, neglect, exploitation, misappropriated property, and theft.*
- *By October 18, 2013, the licensee, at own expense, must hire a nurse consultant not associated with the ALF and its corporation, who also is a registered nurse delegator and familiar with ALF laws and regulations, to assist the ALF in developing and implementing a safe medication system that meets the needs of all residents. The nurse consultant will:*
  - *Be familiar with ALF laws and regulations related to medication systems.*
  - *Assess all resident medication orders, medication records, and pharmacy records, and make changes to resident records to ensure they are in compliance with ALF rules and regulations.*
  - *Train the licensee and staff on the developed system and ensure they have the knowledge and skills ongoing for safe medication administration, blood*

*glucose, pulse, and blood pressure readings necessary for medication administration decision-making, and monitoring including documentation on logs, calling the physician about high or low blood glucose readings, and following physician orders.*

- *Monitor the ALF medication system every day for one week, then once a week for one month, then twice a month for one month.*
- *Assist the licensee in developing and implementing an ongoing quality assurance monitoring system to identify medication errors, any medications not given, any medications not logged, any blood glucose readings not reported to physicians, and any blood pressure, pulse, and blood glucose checks not completed.*
- *Assist the licensee to develop and implement a system to ensure staff qualifications, training, and competency for delegation of administration of medication is met per ALF requirements ongoing.*
- *Assist licensee to develop and implement a system that ensures resident medication availability ongoing.*
- *The licensee will ensure the Executive Director is in the ALF 5 days a week for consistent oversight of operations and must have Corporate coverage for oversight when the Executive Director is not on duty.*
- *The licensee must maintain documentation of completion of training in staff files.*
- *The licensee must give the consultants a copy of the September 23, 2013 Statement of Deficiencies and review areas of noncompliance in need of correction.*
- *The consultants must be available to the Department for questioning.*
- *The licensee must post this Notice of Conditions with the license in a visible location in a common use area.*

The effective date of the condition on your license is October 4, 2013. As provided in RCW 18.20.190, the effective date of the condition on your license will not be postponed pending an administrative hearing or informal dispute resolution review.

Plan of Correction/Attestation

You Must:

Return the plan, on the enclosed report, within 10 calendar days after you receive this letter.

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Include the following in your plan for each deficiency:

- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency.

Send your plan to:

Dina Longen-Grimes, Field Manager  
District 3, Unit B  
P.O. Box 45819  
MS: N27-24  
Olympia WA 98504-5819  
(253) 983-3837/ Fax: (253) 589-7240

As provided in RCW 18.20, you may request an informal dispute resolution review of enforcement actions initiated in response to a Statement of Deficiencies report. During the informal dispute resolution process you also have the right to present written evidence. A request for informal dispute resolution review will not change the deadline for you to request an administrative hearing. Informal dispute resolution review by the department is not binding in an administrative hearing.

To request an informal dispute resolution review, send your written request to:

Informal Dispute Resolution Program Manager  
Residential Care Services  
PO Box 45600  
Olympia, Washington 98504-5600  
Fax (360) 725-3225

The written request should:

- Identify the citation and/or enforcement action that is disputed;
- Explain why the home is disputing the action;
- Indicate the type of dispute resolution process you prefer (direct meeting, telephone conference or documentation review); and,
- Be sent within 10 working days of your receipt of this notice.

You may contest the civil fine and conditions on the license by requesting an administrative hearing. To do so, the Office of Administrative Hearings must receive your written request for a hearing within twenty-eight (28) calendar days following receipt of this letter. A copy of this letter and a copy of the enclosed Statement of Deficiencies must be included with your request. Send your request to:

Office of Administrative Hearings  
PO Box 42489

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Olympia, Washington 98504-2489

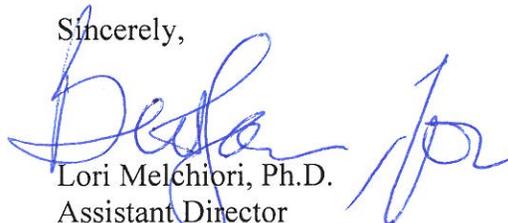
If no hearing is requested, the fine is due twenty-eight (28) calendar days after receipt of this notice. Please remit a check for \$10,750.00 payable to the Department of Social and Health Services. The check should be sent to:

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

If payment has not been received within twenty-eight (28) calendar days after receipt of this notice, interest will begin to accrue 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) calendar days, the balance due the department will be recovered.

If you have any questions, please contact Field Manager Dina Longen-Grimes at (253)983-3837.

Sincerely,



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

Enclosure

cc: Bett Schlemmer, Compliance Specialist  
Field Manager, District 3, Unit B  
RCS District Administrator, District 3  
HCS Regional Administrator, Region 3  
DDD Regional Administrator, Region 3  
WA LTC Ombuds  
Area Agency on Aging, AAA-Pierce  
Office of Financial Recovery, Vendor Program Unit  
Medicaid Fraud Control Unit  
Judi Plesha, HCS  
BAM