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

September 3, 2014

CERTIFIED MAIL 7007 1490 0003 4302 5805

Administrator
North Creek Retirement & Assisted Living Community
3425 Boone Road SE
Salem, OR 97317

Assisted Living Facility License #**1995**
Licensee: North Creek Retirement & Assisted Living Community, LLC.

IMPOSITION OF CIVIL FINE AND
IMPOSITION OF CONDITIONS ON A LICENSE

Dear Administrator:

On August 22, 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 a civil fine and the imposition of conditions on the license for your assisted living facility, also known as **North Creek Retirement & Assisted Living Community,** located at **1907 201st Place SE, Bothell,** 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 fine and conditions on the license is based on the following violations of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated **August 22, 2014.**

Civil Fine

WAC 388-78A-2700(1)(2)(c)(i)(ii)(iii) – Safety measures and disaster preparedness.
$100.00

The licensee failed to ensure investigations were done and/or in a timely manner for one resident.

This is a repeat deficiency from December 1, 2011, March 9, 2012, November 9, 2012 and January 28, 2014.

Conditions on License

WAC 388-78A-2700(1)(2)(c)(i)(ii)(iii) – Safety measures and disaster preparedness.

The licensee failed to ensure investigations were done and/or in a timely manner for one resident.

This is a repeat deficiency from December 1, 2011, March 9, 2012, November 9, 2012 and January 28, 2014.

The department has determined that the following conditions shall be placed on your assisted living facility license:

- ***The licensee will hire, at their own expense, a nurse consultant not associated with the facility to assist the licensee in:***
- ***Reviewing and updating (if necessary) the facility policy on the prevention of abuse and neglect.***
- ***Training all staff on the recognition and prevention of abuse, neglect, and reporting as well as investigating incidents.***
- ***The licensee will provide the nurse consultant with a copy of the August 14, 2014 Statement of Deficiencies (SOD).***
- ***The nurse consultant will be available to the department to answer questions.***
- ***The nurse consultant must be hired by September 16, 2014.***
- ***The licensee must post this Notice of Conditions of Operation, with the license, in a visible location to residents and visitors.***

These conditions are effective on **September 3, 2014** and remain in effect until lifted by formal Department of Social and Health Services notice.

NOTE: These are the violations which resulted in the fine and conditions; 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.

Return the signed and dated SOD to:

Kay Randall, Field Manager
District 2, Unit A
3906 – 172nd Street NE, Suite 100
Arlington, WA 98223
Phone: (360) 651-6872 / Fax: (360) 651-6940

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 fine by requesting a formal administrative hearing to challenge the deficiencies which resulted in the civil fine. **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

Payment:

If you do not request a formal administrative hearing, the civil fine(s) is due to the Office of Financial Recovery twenty-eight (28) calendar days after receipt of this letter.

Mail a check for **$100.00** 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 Kay Randall, Field Manager at (360) 651-6872.

Sincerely,

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

Enclosure

cc: Linda Ronco, Compliance Specialist
Field Manager, District 2, Unit A
RCS District Administrator, District 2
HCS District Administrator, District 2
DDA District Administrator, District 2
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
Valentina Karnafel, HCS
NDL