



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Charlton Place Assisted Living Community, LLC
CHARLTON PLACE
9723 South Steele St
Tacoma, WA 98444

RE: CHARLTON PLACE # 2120

Dear Administrator:

This document references Compliance Determination 55025 (03/06/2025), which included complaint number(s) 163668, 164456, 165094.

The Department completed a complaint investigation of your Assisted Living Facility on 03/06/2025 and found that your facility does not meet the Assisted Living Facility requirements.

The department staff who did the inspection and provided consultation:

Lisa Mason, NCI ALF Licensor

Consultation:

WAC 388-78A-2210 Medication services.

(1) An assisted living facility providing medication service, either directly or indirectly, must:

(b) Develop and implement systems that support and promote safe medication service for each resident.

Interviews said there was a process to deliver pharmacy orders to residents on self-medications. No residents on self-medication were harmed or without medications while at the facility. There was not a process for verifying the medications had been delivered or picked up by the self-medication residents. This deficiency was corrected on-site at

visit.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:

- Inspect the facility to determine if you have corrected all deficiencies.

You May:

- Contact me for clarification of the deficiency or deficiencies found.

In Addition, You May:

- Request an **Informal Dispute Resolution (IDR)** review within 10 working days after you receive this letter. Your IDR request **must** include:
 - o What specific deficiency or deficiencies you disagree with;
 - o Why you disagree with each deficiency; and
 - o Whether you want an IDR to occur in-person, by telephone or as a paper review.
 - o Send your request to:

Email: RCSIDR@dshs.wa.gov; or

Fax: (360) 725-3225

If You Have Any Questions:

- Please contact me at (253)442-3013.

Sincerely,



Manfay Chan, Allied Health Field Manager

Region 3, Unit D

Residential Care Services