



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 45819, Olympia, WA 98504

April 22, 2019

CERTIFIED MAIL

7018 6080 0000 3183 7673

Highland Court Operating Company LLC
Highland Court Memory Care
1704 Melody Ln
Port Angeles, WA 98362

RE: Highland Court Memory Care License #2378

Dear Administrator:

The Department completed a complaint investigation of your assisted living facility on April 8, 2019 and found that your facility does not meet the assisted living facility licensing requirements listed below.

The Department staff who did the investigation and provided consultation:
Jutta Wabinga, Community Complaint Investigator
Angela Jones, Complaint Investigator

Consultation:

WAC 388-78A-3000 Ventilation. The assisted living facility must:

(2) Designate and ventilate smoking areas, if smoking is permitted in the assisted living facility, to prevent air contamination throughout the assisted living facility;

On 4/8/2019 at 2:25 PM, and 3:30 PM two different staff were observed smoking outside of the kitchen door next to the facility. There was a designated smoking area which was not covered at this time. At 3:45 p.m., Staff A, Administrator acknowledged staff should not be smoking within 25 feet of the facility and stated she would talk to the staff and had plans to cover the smoking area.

You Must:

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

You May:

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

You Are Not:

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

The Department May:

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

In Addition, You May:


- Request an **Informal Dispute Resolution (IDR)** review within 10 working days after you receive the 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 requests to:

IDR Program Manager
Department of Social and Health Services
Aging and Long-Term Support Administration
Residential Care Services
PO Box 45600
Olympia, WA 98504-5600

If You Have Any Questions:

- Please contact me at (360) 664-8421.

Sincerely,



Chris Cornell, Field Manager
Region 3, Unit D
Residential Care Services

Enclosure