



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

May 23, 2018

CERTIFIED MAIL 7017 1070 0000 5535 6638

Administrator
Eagle Springs Senior Alzheimers Community
20 SE Larch Ave
College Place, WA 99324

Assisted Living Facility License # **2400**
Licensee: LSREF Golden Ops 26 (WA) LLC

**CONTINUING STOP PLACEMENT ORDER PROHIBITING ADMISSIONS
AND IMPOSITION OF CONDITIONS ON A LICENSE**

Dear Administrator:

On May 16, 2018, the Department of Social and Health Services (DSHS), Residential Care Services completed an investigation at your facility. This letter constitutes formal notice of the continuing stop placement order prohibiting admissions and imposition of conditions on the license for your assisted living facility, also known as **Eagle Springs Senior Alzheimers Community**, located at **20 SE Larch Ave, College Place**, 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 continuing stop placement order prohibiting admissions and conditions on the license are based on the following violations of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated **May 16, 2018**.

Continuing Stop Placement Order Prohibiting Admissions, and Conditions Imposed on the License

WAC 388-78A-2600(2)(a)(I) Policies and procedures

The facility failed to ensure policies were implemented by staff for abuse, possible financial exploitation and medication disposal.

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WAC 388-78A-2630(1)(a) Reporting abuse and neglect

The facility staff failed to report allegations of abuse, neglect, and financial exploitation as required.

WAC 388-78A-2660(1)(7) Resident rights

The facility failed to ensure residents were free from verbal abuse, demeaning comments and possible financial exploitation.

NOTE: These are the violations, which resulted in the continuing stop placement order prohibiting admissions and the conditions on a license; see the attached Statement of Deficiencies for any additional violations.

The stop placement order prohibiting admissions to your assisted living facility was effective immediately upon **verbal** notice to you on **April 20, 2018**, and in a notice letter dated April 20, 2018. 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 Chana White, Field Manager at (509) 225-2823.

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.

Conditions on License

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

- *The licensee must hire an outside Consultant, familiar with Assisted Living Facility regulations and requirements, to provide training regarding abuse, neglect and financial exploitation to include recognition of abuse and financial exploitation and actions to take in response to such allegations/incidents and the process for logging, accounting and destruction of controlled medications.*
- *The Consultant shall be hired no later than June 1, 2018.*
- *The licensee and Consultant will review all policies and procedures related to:*
 - *Abuse and/or Neglect and financial exploitation per RCW 74.34;*
 - *Reporting of abuse and neglect per WAC 388-78A-2630 and RCW 74.34;*
 - *Managing residents' medications including medication disposition per WAC 388-78A-2600.*
- *The licensee in collaboration with the Consultant will train staff on the above policies and procedures to ensure consistent implementation for resident safety and well-being.*
- *The Consultant must contact the Field Manager to review the plan and content of training prior to implementation.*
- *This education and training must include all facility staff including the current Administrator and Director of Nursing and must occur no later than June 18, 2018.*
- *The facility must give a copy of the Statement of Deficiencies report dated May 16, 2018 to the Consultant.*
- *The Consultant will be available to the Department for questions.*
- *The licensee must post the license with the enclosed Notice of Conditions of Operation in a location accessible to residents and visitors.*

These conditions are effective on **May 23, 2018** and remain in effect until lifted by formal Department of Social and Health Services notice.

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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Chana White, Field Manager
Region 1, Unit C
3611 River Road, Suite 200
Yakima, WA 98902
Phone: (509) 225-2823 / Fax: (509) 574-5597

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

Formal Administrative Hearing

You may contest the conditions on a license and stop placement order prohibiting admissions by requesting a formal administrative hearing to challenge the deficiencies, which resulted in the conditions on a license and stop placement order prohibiting admissions. **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.

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Send your **written** request to:

Office of Administrative Hearings
PO Box 42489
Olympia, Washington 98504-2489

If you have any questions, please contact Chana White, Field Manager at (509) 225-2823.

Sincerely,



Dina Longen-Grimes, RN, MSN
Compliance Specialist
Residential Care Services

Enclosure

cc: Field Manager, Region 1, Unit C
RCS Regional Administrator, Region 1
HCS Regional Administrator, Region 1
DDA Regional Administrator, Region 1
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
HQ Central Files
DRW
jbc

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REQUEST FOR AN ON-SITE REVISIT WITHIN 15 WORKING DAYS

FACILITY: _____

ADDRESS: _____

DATE REQUEST FAXED: _____ **DATE MAILED:** _____

TO: _____, Field Manager, Region ___ Unit ___

I believe we have corrected the violations that led to my facility/home being placed in stop placement of new admissions. I am requesting an onsite revisit within 15 working days of receipt of this letter to verify that correction(s) is complete.

The following steps have been taken to ensure lasting correction.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Licensee or Designee Signature

Date