



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave, Suite 200, Vancouver, WA 98684

Prairie Vista Senior Living LLC
Prairie Vista Senior Living LLC
11501 NE 192nd Ave
Brush Prairie , WA 98606

RE: Prairie Vista Senior Living LLC # 755250

Dear Provider:

This document references Compliance Determination 32499 (11/29/2023), which included complaint number(s) 102282.

The Department completed a complaint investigation of your Adult Family Home on 11/29/2023 and found that your home does not meet the Adult Family Home Licensing requirements.

The department staff who did the inspection and provided consultation:

Robert Hennig, NCI ALF Complaint Investigator

A licensor may consult with a provider when a violation of the Washington Administrative Code (WAC) or Revised Code of Washington (RCW) is found, but it is not cited in the Statement of Deficiencies. Violations may not be cited when it is a first-time violation of statute or rule with minimal or no harm to residents. A consult does not require a follow-up visit.

Consultation:

WAC 388-76-10685 Bedrooms. The adult family home must meet all of the following requirements:

(11) Provide each resident a call bell, or an alternative way of alerting staff in an emergency, that the resident can use, unless the bedroom of an AFH staff member is within hearing distance of the resident's bedroom and a staff member will be within hearing distance at all times.

Call lights observed to be available for residents, but not provided to a resident capable of utilizing the call light. Provider stated resident was overusing the call light unnecessarily and the call light was no longer provided. A consultation was completed with Provider, and was able to provide resident with call light on-site with communication of appropriate times to utilize the call light. Additional residents reviewed for safety, care and services, with no concerns.

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 home to determine if you have corrected all deficiencies.

You May:

- Ask for a informal dispute resolution meeting, according to the attached 'Informal Dispute Resolution' instructions; and
- Ask questions and provide written information to help clarify or dispute the deficiencies.
- Contact me for clarification of the deficiency or deficiencies found.

If You Have Any Questions:

- Please contact me at (360)450-1218.

Sincerely,

Michael Burdick, Field Manager
Region 3, Unit F
Residential Care Services

INFORMAL DISPUTE RESOLUTION [RCW 70.128]

You May:

Request an Informal Dispute Resolution (IDR) meeting within 10 working days after the date you receive this letter. You **must** use an '**IDR Request Form**' for **each** citation or enforcement you plan to dispute. You can find this form and directions on the IDR Adult Family Home web page at: <https://www.dshs.wa.gov/altsa/idr>

Provider Process for Choosing a Panel or Traditional IDR:

You may only choose a **Panel IDR** if you are disputing **three or fewer** citations or enforcement actions. You may choose a **Traditional IDR** regardless of the number of citations or enforcement actions you intend to dispute. If you choose a **Panel IDR**, all documents supporting your dispute must be submitted within **20 working days** after the date you receive this letter. For **Panel IDRs** the program will not consider any documents submitted after the **20 working day deadline**. For **Traditional IDRs** you should submit documents supporting your dispute at least **seven** days prior to the date of the IDR meeting.

Send your request and supporting documents to the address below or email to rcsidr@dshs.wa.gov:

Adult Family Home IDR Program
Residential Care Services
PO Box 45600
Olympia, WA 98504-5600



Residential Care Services Investigation Summary Report

Provider/Facility: Prairie Vista Senior Living LLC
License/Cert.#: 755250
Compliance Determination #: 32499
Investigator: Robert Hennig
Investigation Date(s): 11/13/2023 through 11/29/2023
Complainant Contact Date(s):

Provider Type: Adult Family Home
Intake ID: 102282
Region/Unit #: RCS Region 3 / Unit F

Allegation(s):

1. Resident not provided a call light or alternative way to alert staff with needs or in the event of an emergency.

Investigation Methods:

Sample:	Total residents: 4 Resident sample size: 2 Closed records sample size: 0
Observations:	Identified resident Residents Resident rooms Staff to resident interactions
Interviews:	Identified resident Identified staff Residents Provider
Record Reviews:	Facility policies Assessment Negotiated Care Plan Service Agreement

Investigation Summary:

1. Resident not provided a call light or alternative way to alert staff with needs or in the event of an emergency. The unannounced on-site investigation was conducted in relation to all allegations and/or incidents identified in the intake. Based on interviews, observations and records review, failed facility practice was substantiated. Call lights observed to be available for residents, but not provided to a resident capable of utilizing the call light. Provider stated resident was overusing the call light unnecessarily and the call light was no longer provided. A consultation was completed with Provider, and was able to provide resident with call light on-site with communication of appropriate times to utilize the call light. Additional residents reviewed for safety, care and services, with no concerns.

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A