STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

SPOKN LLC
FAIRWINDS - SPOKANE
520 EAST HOLLAND AVE
SPOKANE, WA 99218

RE: FAIRWINDS - SPOKANE License # 1455

Dear Administrator:

This letter addresses Compliance Determination(s) 25013 (Completion Date 06/09/2023) and 22085 (Completion Date 04/20/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 06/09/2023 and found no deficiencies. Your facility meets the Assisted Living Facility licensing requirements.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2210-2, WAC 388-78A-24642-1, WAC 388-78A-2484, WAC 388-78A-2484-1, WAC 388-78A-2484-2

The Department staff who did the on-site verification:
Veronica Jackson, Assisted Living Facility Licensor
Janet Quirk, Long Term Care Surveyor
Joy Pipgras, LTC Surveyor

If you have any questions, please contact me at (509)993-7821.

Sincerely,

Stephanie Jenks, Field Manager
Region 1, Unit B
Residential Care Services

STATE OF WASHINGTON
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8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

Statement of Deficiencies	License #: 1455	Compliance Determination # 22085
Plan of Correction	FAIRWINDS - SPOKANE	Completion Date
Page 1 of 6	Licensee: SPOKN LLC	04/20/2023

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Assisted Living Facility license.

The department completed data collection for the unannounced on-site full inspection on 04/10/2023 and 04/13/2023 of:
FAIRWINDS - SPOKANE
520 EAST HOLLAND AVE
SPOKANE, WA 99218

The following sample was selected for review during the unannounced on-site visit: 9 of 78 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Janet Quirk, Long Term Care Surveyor
Joy Pipgras, LTC Surveyor
Carla Rose, NCI Community Licensor
Veronica Jackson, Assisted Living Facility Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit 8
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

J Salquist
Residential Care Services

04/25/2023
Date

I understand that to maintain an Assisted Living Facility license, the facility must be in compliance with all the licensing laws and regulations at all times.

Jane Bentz
Administrator (or Representative)

4/27/2023
Date

WAC 388-78A-2210 Medication services.

(2) The assisted living facility must ensure the following residents receive their medications as prescribed, except as provided for in WAC 388-78A-2230 and 388-78A-2250 :

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to ensure a blood pressure (BP) medication was given as prescribed for 1 of 9 residents (Resident 1). This failed practice placed Resident 1 at risk of receiving the wrong dose of prescribed medications.

Findings included

Review of Resident 1's Negotiated Service Agreement (NSA), dated 01/26/2023, showed the facility was to provide medication assistance to Resident 1.

Review of Resident 1's Medication Administration Records (MAR) for January 2023, February 2023, March 2023, and April 2023, showed the resident was prescribed lisinopril (medication used to treat high blood pressure). The order for lisinopril was written as follows: Lisinopril 20 MG TABS, take 1 tablet by mouth daily. If BP is less than 110/75, cut lisinopril in half. If BP is less than 100/60, hold lisinopril for 24 hours.

Review of Resident 1's MAR for January 2023, showed the lisinopril was held on 01/10/2023 when the BP was 110/54.

Review of Resident 1's MAR's for January 2023 and February 2023, showed the medication was held and the BP was not documented on the following dates:

01/24/2023

01/31/2023

02/06/2023

Review of Resident 1's MAR's for January 2023 and March 2023, showed the lisinopril was held when a half tablet (10 MG) should have been administered on the following dates:

01/11/2023 BP 109/54

03/02/2023 BP 101/70

03/11/2023 BP 102/62

03/28/2023 BP 107/58

Review of Resident 1's MAR's for January 2023, February 2023, March 2023, and April 2023, showed lisinopril was given a total of 87 times with seven of the 87 BP readings within parameters to administer a half tablet. The documentation on the MAR's did not indicate if the dosage administered was one tablet or a half tablet.

On 04/11/2023 at 11:18 AM, Staff F, Health and Wellness Director, confirmed the documentation does not show if the dose administered was a whole tablet or a half tablet.

Plan/Attestation Statement

I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, FAIRWINDS - SPOKANE is or will be in compliance with this law and / or regulation on (Date) 4/27/2023

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Jane Bartz — Administrator (or Representative)

4/27/2023 — Date

WAC 388-78A-24642 Background checks National fingerprint background check.

(1) Administrators and all caregivers who are hired after January 7, 2012 and are not disqualified by the Washington state name and date of birth background check, must complete a national fingerprint background check and follow department procedures

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to complete fingerprint background checks for 1 of 5 staff (Staff C). This failed practice placed residents at risk of by receiving unsupervised care and services from potentially disqualified caregivers

Findings included...

Review of Staff C's, Resident Assistant, personnel file showed they had a hire date of 12/03/2022.

Review of Staff C's personnel file did not contain a completed national fingerprint background check (over four months after being hired)

In an interview on 04/13/2023 at 4:05 PM, Staff G, General Manager, stated they were aware that Staff C did not have a fingerprint completed

Plan/Attestation Statement

I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, FAIRWINDS - SPOKANE is or will be in compliance with this law and / or regulation on (Date) 4/28/2023.

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Administrator (or Representative) 4/27/2023 Date

WAC 388-78A-2484 Tuberculosis Two step skin testing. Unless the staff person meets the requirement for having no skin testing or only one test, the assisted living facility choosing to do skin testing, must ensure that each staff person has the following two-step skin testing:

(1) An initial skin test within three days of employment; and

(2) A second test done one to three weeks after the first test.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to complete tuberculosis (TB), a communicable respiratory disease, testing of 19 of 19 staff (Staff E, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, and X), hired between 04/02/2020 and 06/30/2022 and the facility failed to ensure the second TB test was completed within one to three weeks after the initial test for 2 of 5 staff (Staff A and C). This failure potentially placed residents at risk of exposure to TB infection.

Findings included...

The facility received a Dear Provider Letter (ALF #2022-018) from Residential Care Services (RCS), initially sent on 05/17/2022, and amended on 05/26/2022, with notification the TB

testing waiver would end on 07/01/2022. In the letter

Review of Staff A's, Server, personnel file showed they had a hire date of 03/03/2023. Further review showed the first step TB test was completed on 03/06/2023 and the second step TB test was initiated on 04/12/2023, five weeks and two days later.

Review of Staff C's, Resident Assistant, personnel file showed they had a hire date of 12/03/2022. Further review showed the first step TB test was completed on 12/06/2022 and the second step TB test was initiated on 01/20/2023, six weeks and three days later

Review of Staff E's, Health and Wellness Coordinator, personnel file showed they were hired on 10/29/2020. Further review showed there was no record they had a TB test.

Review of facility staff list showed that the following staff were hired between 04/02/2020 and 06/30/2022:

-Staff G, Receptionist, hired 04/02/2020

-Staff H, Receptionist, hired 07/27/2021

-Staff I, Receptionist, hired 07/15/2020

-Staff J, Night Attendant, hired 06/03/2022

-Staff K, Restaurant Server, hired 01/20/2021

-Staff L, Restaurant Lead Server, hired 11/30/2021

-Staff M, Restaurant Server, hired 01/12/2022

-Staff N, Bistro Server, hired 06/29/2022

-Staff O, Bistro Server, hired 01/08/2022

-Staff P, Driver, hired 08/10/2021

-Staff Q, Resident Assistant I, hired 12/13/2021

-Staff R, Resident Assistant II, hired 02/03/2022

-Staff S, Resident Assistant I, hired 06/18/2021

-Staff T, Resident Assistant II, hired, 03/03/2022

-Staff U, Resident Assistant I, hired 07/09/2020

-Staff V, Housekeeper, hired 02/02/2021

-Staff W, Housekeeper, hired 07/20/2020

Staff X, Plant Operations Assistant, 02/09/2022

In an interview on 04/13/2023, at 9:33 AM, Staff G, General Manager, stated they had hired 20 new employees while the TB testing waiver was in effect. Staff G confirmed they had not completed any TB testing for those staff members.

Plan/Attestation Statement

I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, FAIRWINDS - SPOKANE is or will be in compliance with this law and / or regulation on (Date) 06/01/2023.

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Jane Bell — Administrator (or Representative)

4/27/23 — Date