STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

SPRING CREEK RETIREMENT & ASSISTED LIVING COMMUNITY LLC
SPRING CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
3425 Boone Rd SE
SALEM, OR 97317

RE: SPRING CREEK RETIREMENT & ASSISTED LIVING COMMUNITY License # 1913

Dear Administrator:

This letter addresses Compliance Determination(s) 34688 (Completion Date 01/30/2024) and 31453 (Completion Date 10/23/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 01/30/2024 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-2040-2, WAC 388-78A-2040

The Department staff who did the on-site verification:
Judith Mellon, RN, Licensor

If you have any questions, please contact me at (360)651-6846.

Sincerely,

Kimberley Ripley, Field Manager
Region 2, Unit A
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: SPRING CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
License/Cert.#: 1913
Provider Type: Assisted Living Facility
Intake ID: 101649
Region/Unit #: RCS Region 2 / Unit A
Compliance Determination #: 31453
Investigator: Helen Fisher
Investigation Date(s): 10/23/2023 through 10/23/2023
Complainant Contact Date(s): 10/23/2023

Allegation(s):
The Assisted Living Facility (ALF) failed their 2nd Fire and Life Safety inspection.

Investigation Methods:

Sample:	Total residents: 82 Resident sample size: Closed records sample size:
Observations:	Environment.
Interviews:	Maintenance Director
Record Reviews:	Fire Marshall report

Investigation Summary:
The ALF had failed their third Fire and Life Safety inspection. A citation was written for 388-78A-2040(2) Other requirements.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

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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 an unannounced on-site complaint investigation on 10/23/2023 and 10/23/2023 of:

SPRING CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
223 EAST BAKERVIEW ROAD
BELLINGHAM, WA 98226

This document references the following complaint number(s): 101649

The following sample was selected for review during the unannounced on-site visit: 0 of 82 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Helen Fisher, Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit A
3906-172nd St NE, Suite #100
Arlington, WA 98223

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.

Residential Care Services

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.

Administrator (or Representative) Date

WAC 388-78A-2040 Other requirements.

(2) The assisted living facility must have its building approved by the Washington state fire marshal in order to be licensed.

This requirement was not met as evidenced by:

Based on interview and record review
the Assisted Living Facility (ALF) failed to ensure the violations for 2 of 2
Fire and Life Safety annual inspections (08/24/2023 and 09/25/2023) were corrected. This failure resulted in the ALF being out of compliance with the State Fire Marshal and placed all 82 residents at risk of harm in the event of a fire.

Findings included...

Review of the Washington State Patrol
Fire Protection Bureau report dated 08/24/2023 (first visit), showed the ALF had failed to comply with the International Fire Codes (IFC) for 14 items.
During the Fire Marshal's second visit on 09/25/2023, the following 9 items had not been corrected:

IFC 607 .3.3.3. 1 2018 Tags. The kitchen hood
cleaning tag is not installed on the hood.

IFC 705.2.4 2018 Hanging Displays. The general
store has decorations hanging from acoustical ceiling system.

IFC 703.1 2018 Penetration-
Maintaining Protection. There was two 18 inch by 24 inch holes in the ceiling of the 2nd floor laundry where a leak has been repaired but the ceiling fire barrier has not been repaired.

IFC 705.2 2018 Inspection and
Maintenance. Resident room doors [redacted] and [redacted] are equipped with unauthorized magnet hold open devices that are not connected to the fire alarm system, preventing it from automatically closing and latching.

IFC 705.2.4 2018 Door Operation. The fire rated door from the memory care activity room corridor would not close and latch from a fully open position.

IFC 706.1 2018 Duct and Air Transfer
Openings-Maintaining Protection. The facility is unable to provide documentation for the 4-year fire and smoke damper inspection.

IFC 903.5 2009, 2012, 2015, 2018
Testing and Maintenance.

1) Facility is unable to provide documentation for the annual sprinkler system inspection.

2) Facility is unable to provide documentation for the 3-year dry system full flow trip test.

IFC 904. 12.5.2 2018 Extinguishing

System Service. Facility is unable to provide documentation for semi-annual kitchen suppression system servicing.

IFC 1203.4 2018 Maintenance. The facility is
unable to provide documentation for annual servicing of the emergency generator.

During an interview on 10/23/2023 at 11:49
AM, Staff A, Maintenance Director stated that they have corrected 8 out of 9 violations. The memory care activity room fire door remained uncorrected. ALF was not back in compliance with the IFC violations.

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, SPRING CREEK RETIREMENT & ASSISTED LIVING COMMUNITY is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____

Administrator (or Representative) Date