



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

02/03/2025

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 # 1913

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 53011 (Completion Date 02/03/2025) and 50624 (Completion Date 11/27/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 02/03/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 388-112A-0080 Who is required to complete the seventy-hour long-term care worker basic training and by when? The following individuals must complete the seventy-hour long-term care worker basic training unless exempt as described in WAC 388-112A-0090 :

(3) Long-term care workers in adult family homes within one hundred twenty days of date of hire. Long-term care workers must not provide personal care without direct supervision until they have completed the seventy-hour long-term care worker basic training.

WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(b) Basic;

The Department staff who did the On Site verification:

Helen Fisher, Complaint Investigator

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

Sincerely,

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



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

Statement of Deficiencies	License #: 1913	Compliance Determination # 50624
Plan of Correction	SPRING CREEK RETIREMENT & ASSISTED LIVING	Completion Date
Page 1 of 4	Licensee: SPRING CREEK RETIREMENT & ASSISTED LIVING	11/27/2024

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 follow-up on 11/21/2024 and 11/21/2024 of:

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

This document references the following SOD dated: 11/27/2024

The following sample was selected for review during the unannounced on-site visit: 0 of 96 current residents and 0 former residents.

The department staff that inspected 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.

This document was prepared by Residential Care Services for the Locator website.

Administrator (or Representative)

Date

WAC 388-112A-0080 Who is required to complete the seventy-hour long-term care worker basic training and by when? The following individuals must complete the seventy-hour long-term care worker basic training unless exempt as described in WAC 388-112A-0090 :

(3) Long-term care workers in adult family homes within one hundred twenty days of date of hire. Long-term care workers must not provide personal care without direct supervision until they have completed the seventy-hour long-term care worker basic training.

WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(b) Basic;

This requirement was not met as evidenced by:

Based on interviews and record reviews, the Assisted Living Facility (ALF) failed to ensure 3 of 3 staff (Staff A, B, and C) completed 70-hour basic training within 120 days from their date of hire. This failure resulted in Staff A, B, and C not having the necessary training related to their job duties and placed all 96 residents at risk for compromised care and safety.

Findings included...

Review of the Department of Social and Health Services (DSHS) Secure Tracking and Reporting System (STARS) showed that on 09/03/2024, the Assisted Living Facility (ALF) received a citation for this regulation. The ALF signed an attestation statement that stated the facility would have a system in place and the deficiency corrected by 10/18/2024.

Review of the Dear Provider Letter, ALF #2023-025, dated 10/13/2023, showed the Department of Health extended certification deadlines for long-term care workers hired between 08/17/2019 and 01/31/2024. The letter showed long-term care workers must meet the certification and training deadlines to be in compliance with regulatory

requirements. An included table showed a long-term care worker hired between 10/01/2022 to 06/30/2023 must complete basic training no later than 11/30/2023, and that a long-term worker hired between 07/01/2023 to 01/31/2024 must complete basic training no later than 120 days from the date of hire.

Records showed Staff A, Caregiver, was hired on 04/23/2024. Review of Staff A's file showed there was no documentation that Staff A had completed 70-hour basic training. No basic training certificate was available for review. Records showed Staff A should have completed their 70-hour basic training no later than 08/23/2024. Staff A's 70-hour basic training was late by 72 days.

Records showed Staff B, Caregiver, was hired on 05/11/2023. Review of Staff B's file showed there was no documentation that Staff B had completed 70-hour basic training. No basic training certificate was available for review. Records showed Staff B should have completed their 70-hour basic training no later than 09/11/2023. Staff B training was late by 421 days.

In an interview on 11/21/2024 at 10:00 AM, Staff B stated that they have not finished all their 70-hour basic training and was still working on it.

Records showed Staff C, Med Tech, was hired on 06/06/2022. Review of file Staff C's showed there was no documentation that Staff C had completed 70-hour basic training. No basic training certificate was available for review. Staff C should have completed their 70-hour basic training no later than 10/06/2022. Staff C training was late by 730 days.

On 11/04/2024 at 3:20 PM, Staff C stated that they had not finished all their 70-hour basic training. Staff C stated that they were unsure when they would finish the 70-hour basic training.

On 11/21/2024 at 11:02 AM, Staff D, Regional of Operations, stated that they recently did their training audit and would be doing the staff training soon.

This is an uncorrected deficiency previously cited on 09/03/2024.

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



Residential Care Services Investigation Summary Report

Provider/Facility: SPRING CREEK
RETIREMENT & ASSISTED LIVING
COMMUNITY

License/Cert.#: 1913

Compliance Determination #: 44626

Investigator: Helen Fisher

Investigation Date(s): 07/25/2024 through 09/03/2024

Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 136645

Region/Unit #: RCS Region 2 / Unit A

Allegation(s):

The Named Staff (NS) was sexually inappropriate with the Named Resident (NR).

Investigation Methods:

Sample:	Total residents: 91 Resident sample size: 3 Closed records sample size: 2
Observations:	Sampled Residents appearance and demeanor, staff to residents interactions, residents' social interactions, living quarter, environment.
Interviews:	NS, sampled staff, NR, sampled residents, NR's representative, regional of operations.
Record Reviews:	NR's negotiated service agreement, progress notes, incident investigation. Sampled residents negotiated service agreement. Abuse and neglect policy and procedures, staff credential and background check.

Investigation Summary:

The NR had a thought disorder related to a mental illness. The NR stated that there were three men who went in their apartment at 3:00 AM while they and their partner were in bed sleeping. The NR stated that one of the men pulled their shirt up. The NR denied being touched. The NR did not remember the date of the incident and had not made a report to the ALF. The NR identified the NS as the one who pulled their shirt up. The NS was an agency staff who covered shifts from 6:00 AM to 2:00 PM and from 2:00 PM to 10:00 PM. The NS was not working at the time of the incident. The NS did not work night shift 10:00 PM to 6:00 AM in the month of June. Sampled staff, a male and a female who worked night shifts the week the NR said the incident happened. The staff stated that the NR and their partner lived in a separate apartment. Both staff went to the NR's apartment to assist the NR's partner back to their own apartment. Both staff denied pulling the NR's shirt up. The ALF's Regional of Operations (ROO) stated that they did an investigation. Abuse

and neglect was ruled out. The ROO stated that the NR's family moved the NR out before they became aware of the incident and were not able to interview the NR because the family did not allow it. The NS was removed from the schedule. The NS credentials and background check were reviewed and were cleared. Two of two sampled staff background check were cleared. However, one of two sampled staff failed to complete their 70-hours basic training while working with residents unsupervised. Failed practice was identified. A citation was written for noncompliance with Washington Administrative Code 388-78A-2474(2)(b).

Conclusion / Action:

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



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Statement of Deficiencies	License #: 1913	Compliance Determination # 44626
Plan of Correction	SPRING CREEK RETIREMENT & ASSISTED LIVING	Completion Date
Page 1 of 3	Licensee: SPRING CREEK RETIREMENT & ASSISTED LIVING COMMUNITY LLC	09/03/2024

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 07/25/2024 and 07/25/2024 of:

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

This document references the following complaint number(s): 136645

The following sample was selected for review during the unannounced on-site visit: 3 of 91 current residents and 2 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

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WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(b) Basic;

This requirement was not met as evidenced by:

Based on interviews and record reviews, the Assisted Living Facility (ALF) failed to ensure 1 of 3 staff (Staff A) completed 70-hour basic training within 120 days from their date of hire. This failure resulted in Staff A not having the necessary training related to their job duties and placed all 91 residents at risk for compromised care and safety.

Findings included...

Review of the Dear Provider Letter, ALF #2023-025, dated 10/13/2023, showed the Department of Health extended certification deadlines for long-term care workers hired between 08/17/2019 and 01/31/2024. The letter showed long-term care workers must meet the certification and training deadlines to be in compliance with regulatory requirements. An included table showed a long-term care worker hired between 10/01/2022 to 06/30/2023 must complete basic training no later than 11/30/2023, and that a long-term worker hired between 07/01/2023 to 01/31/2024 must complete basic training no later than 120 days from the date of hire.

Staff A, Caregiver, was hired on 06/22/2023. Review of Staff A's file showed there was no documentation that Staff A had completed 70-hour basic training. No basic training certificate was available for review.

In an interview on 08/26/2024 at 12:29 PM, Staff A stated that they have not finished all their 70-hour basic training and was still working on it.

Review of the table in the Dear Provider Letter, ALF #2023-025, dated 10/13/2023, showed Staff A should have completed their 70-hour basic training no later than 11/30/2023. Staff A's 70-hour basic training was late by 241 days.

On 09/03/2024 at 10:08 AM, Staff B, Executive Director, stated that Staff A had not completed their 70-hour basic training. Staff B stated that they were confused on deadline after COVID extension. Staff B stated that Staff continued to work full time since their hire date.

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