



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Cedar Ridge Retirement & Assisted Living Community LLC
Cedar Ridge Retirement & Assisted Living Community
3425 Boone Rd SE
Salem, OR 97317

RE: Cedar Ridge Retirement & Assisted Living Community License # 1951

Dear Administrator:

This letter addresses Compliance Determination(s) 54329 (Completion Date 02/05/2025) and 51488 (Completion Date 12/17/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 02/05/2025 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 388-112A-0080, WAC 388-112A-0080-5, WAC 388-78A-24681, WAC 388-78A-24681-1, WAC 388-78A-24681-2

The Department staff who did the on-site verification:

Melisa Moran, Assisted Living Facility Nursing Consultant Institutional

If you have any questions, please contact me at (253)442-3013.

Sincerely,

Manfay Chan, Allied Health Field Manager
Region 3, Unit D
Residential Care Services



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Statement of Deficiencies	License #: 1951	Compliance Determination # 51488
Plan of Correction	Cedar Ridge Retirement & Assisted Living Community	Completion Date
Page 1 of 4	Licensee: Cedar Ridge Retirement & Assisted Living Community LLC	12/17/2024

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 the unannounced on-site full inspection on 12/10/2024 and 12/13/2024 of:

Cedar Ridge Retirement & Assisted Living Community
9515 198th Avenue East
Bonney Lake, WA 98391

The following sample was selected for review during the unannounced on-site visit: 9 of 66 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Cathleen Davis, ALF Licensors
Melisa Moran, Assisted Living Facility Nursing Consultant Institutional

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit D
PO Box 99250
Lakewood, WA 98496

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

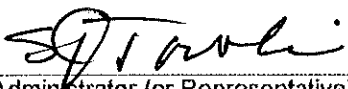
12/24/2024

Date

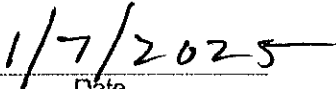
I understand that to maintain an Assisted Living Facility license, the facility must be in compliance with all the licensing laws and regulations at all times.

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

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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 :

(5) Long-term care workers in assisted living facilities within one hundred twenty days of their 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.

This requirement was not met as evidenced by:

Based on records review and interviews, the Assisted Living Facility (ALF) failed to ensure 2 of 6 sampled staff (Staff B and D) completed the required 70-hour Long Term Care training. This failure placed 66 of 66 ALF residents at risk of potential harm from staff not receiving this training.

Findings included...

<Staff B>

Record Review showed Staff B, Caregiver, was hired to the ALF on 05/28/2024. Review of Staff B's training records showed the 70-hour basic training was due on 09/25/2024.

Review of staff work schedules showed Staff B had remained on the schedule from 05/28/2024 to 12/17/2024.

In an interview on 12/12/2024 at 5:00 PM, Staff F, Registered Nurse, stated training records in Staff B's personnel file are current and accurate. Staff F reported that Staff B is currently working towards completing their required 70-hour basic training and is working on their HCA certification as well.

In an interview on 12/12/2024 at 6:00 PM, Staff G, Assistant Executive Director, stated Staff B would be removed from the schedule until their training is completed.

<Staff D>

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Administrator (or Representative)

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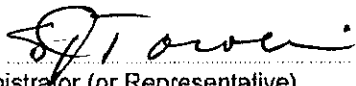
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Record Review of Staff D, Caregiver, showed Staff D was hired to the ALF on 02/15/2024. Review of Staff D training records showed the 70-hour basic training was due for completion on 06/14/2024. Staff D completed the 70-hour basic training on 11/18/2024.

Review of Staff D's personnel records and work schedule showed that Staff D was not terminated on 06/14/2024, which was their deadline for completing their 70-hour basic training. Staff D continued to work continuously until the completion date of 11/18/2024.

In an interview on 12/12/2024 at 5:30 PM Staff F, Registered Nurse, stated training records in Staff D's personnel file are current and accurate.

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, Cedar Ridge Retirement & Assisted Living Community is or will be in compliance with this law and / or regulation on (Date) <u>1/7/2025</u> .	
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.	
 Administrator (or Representative)	<u>1/7/2025</u> Date

WAC 388-78A-24681 Background checks Employment Provisional hire Pending results of national fingerprint background check. The assisted living facility may provisionally employ a caregiver and an administrator hired after January 7, 2012 for one hundred and twenty-days and allow the caregiver or administrator to have unsupervised access to residents when:

- (1) The caregiver or administrator is not disqualified based on the results of the Washington state name and date of birth background check; and
- (2) The results of the national fingerprint background check are pending.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure a department national fingerprint background check (BGC) was completed for 1 of 6 sampled staff (Staff B). This failure placed residents at risk of having care and services provided by staff with a potentially disqualifying crime.

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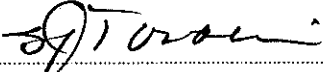
Review of personnel records showed Staff B's, Caregiver, date of hire was 05/28/2024. A department name and date of birth background check result was dated 05/23/2024. There were no documents provided for a National Final Fingerprint Background Check result for Staff B within 120 days of hire which would have been 09/25/2024.

In an interview on 12/12/2024 at 4:15 PM Staff G, Assistant Executive Director, said an appointment was previously scheduled for Staff B for the National Fingerprint Background check when they were hired. However, Staff B missed the appointment. Staff G said, "Another appointment had been scheduled for Staff B to pursue the Final Fingerprint Background Check."

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Date

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Findings included...

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Plan of correction

Cedar Ridge

(1) WAC 388-112A0080

(5) LTW has 120 days to complete 70hrs of LTC training

Findings:

Staff B [REDACTED] – completion date due 9/25/24 not completed

Staff D [REDACTED] – completion due date 6/14/24 completed 11/18/24

POC

- 1- Remove Staff B from schedule until completed with her training
- 2- Audit all of HS staff for the completion of 70 hrs. remove all staff from schedule that are not in compliance with the 70hrs of training until completion.

(2) WAC 388-78A-24681 background check

Findings:

Staff B [REDACTED] – No fingerprint completed.

POC

- 1- Remove staff B from schedule until FP is completed and verified
- 2- Audit All employees for completion of FP as required and WA background as required, remove all employees from schedule that are found to be out of compliance until they are in compliance with up-to-date Background and Fingerprints as required.