



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

02/12/2025

NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY LLC
NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
3425 Boone Road SE
Salem, OR 97317

RE: NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY # 1995

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 54199 (Completion Date 02/12/2025) and 50902 (Completion Date 12/05/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 02/12/2025 and found no deficiencies.

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

WAC 388-78A-2150 Signing negotiated service agreement. The assisted living facility must ensure that the negotiated service agreement is agreed to and signed at least annually by:

- (1) The resident, or the resident's representative if the resident has one and is unable to sign or chooses not to sign;
- (2) A representative of the assisted living facility duly authorized by the assisted living facility to sign on its behalf; and
- (3) Any public or private case manager for the resident, if available.

The Department staff who did the On Site verification:

Erin Steinbrenner, Nursing Consultant Institutional
Faith Le, NCI
Judith Mellon, RN, Licenser

If you have any questions, please contact me at (253)312-1446.

Sincerely,

Jamie Singer, Field Manager

Region 2, Unit J

Residential Care Services

Jamie Singer



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 1995	Compliance Determination # 50902
Plan of Correction	NORTH CREEK RETIREMENT & ASSISTED LIVING	Completion Date
Page 1 of 3	Licensee: NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY LLC	12/05/2024

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 12/03/2024 and 12/05/2024 of:

NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
1907 201ST PLACE SE
BOTHELL, WA 98012

This document references the following SOD dated: 12/05/2024

The following sample was selected for review during the unannounced on-site visit: 9 of 68 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Erin Steinbrenner, Nursing Consultant Institutional

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2, Unit J
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

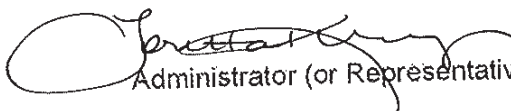
As a result of the on-site visit(s) the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Jamie Singer
Residential Care Services

12/13/2024
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.

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	COMMUNITY LLC	


Administrator (or Representative)

12/14/24
Date

WAC 388-78A-2150 Signing negotiated service agreement. The assisted living facility must ensure that the negotiated service agreement is agreed to and signed at least annually by:

- (1) The resident, or the resident's representative if the resident has one and is unable to sign or chooses not to sign;
- (2) A representative of the assisted living facility duly authorized by the assisted living facility to sign on its behalf; and
- (3) Any public or private case manager for the resident, if available.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure the resident or their representative signed the Negotiated Service Agreement (NSA) for 1 of 9 sampled residents (Resident 6). This placed Resident 6 at risk for receiving or not receiving care and services that had not been agreed upon.

Findings included...

Review of an undated Face Sheet showed the ALF admitted Resident 6 on [REDACTED]/2021. Review of Resident 6's Resident Service Plan (RSP – equivalent to an NSA), dated 09/09/2024, showed no signatures from Resident 6, their representative or a representative of the ALF on the section devoted to signatures.

In an interview, on 12/04/2024 at 2:50 PM, Staff A (Assisted Living Director) confirmed the facility did not have a signed RSP for Resident 6.

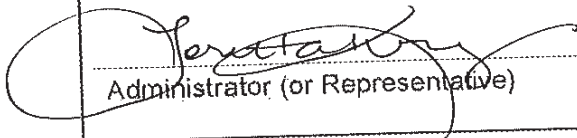
This is a recurring deficiency previously cited on 06/26/2023 and 09/26/2023, and an uncorrected deficiency previously cited on 10/07/2024.

Plan/Attestation Statement

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COMMUNITY LLC		

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, NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY is or will be in compliance with this law and / or regulation on (Date) 1-19-25.

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


 Administrator (or Representative)

12-14-24
 Date



Residential Care Services Investigation Summary Report

Provider/Facility: NORTH CREEK
RETIREMENT & ASSISTED LIVING
COMMUNITY

License/Cert.#: 1995

Compliance Determination #: 45936

Investigator: Michelle Mcglon

Investigation Date(s): 08/20/2024 through 10/07/2024

Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 140403

Region/Unit #: RCS Region 2 / Unit J

Allegation(s):

1. The Named Resident (NR) had increase Assisted Living charges even after changing over to Medicaid.
2. The ALF had ignored and provided incomplete responses to the Ombudsman.
3. The ALF did not send signed service plans.

Investigation Methods:

Sample:	Total residents: 47 Resident sample size: 3 Closed records sample size:
Observations:	Residents Staff to resident interactions Resident to resident interactions
Interviews:	Nursing staff Residents Executive Director Family members
Record Reviews:	State reporting log Facility policies Resident Records

Investigation Summary:

1. Interview and record review showed the NR had an increase in care needs, resulting in increase in care fees through May when [REDACTED] as a payment source was started. Assessment and Negotiated Service Agreement reflected care plan and charges based on the NR's health status. Record review and interview showed [REDACTED] was initiated in [REDACTED] of 2024 there have been no changes since. No failed practice identified
2. In an interview, the Executive Director stated that she had to investigate the request prior to responding to the Ombudsman however she did send records requested. In interview, the Ombuds stated they did not receive all the documents requested but could not provide a preponderance of evidence that records were

missing. No failed practice identified.

3. Interview and record review showed the ALF failed to ensure service plans were signed by residents, their representatives, or an ALF representative. See Statement of Deficiency on 09/30/2024.

Conclusion / Action:

- ☒ 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 08/20/2024, 08/20/2024, 09/23/2024, 09/30/2024 and 09/24/2024 of:

NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
1907 201ST PLACE SE
BOTHELL, WA 98012

This document references the following complaint number(s): 140403, 141036

The following sample was selected for review during the unannounced on-site visit: 3 of 47 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Michelle Mcglon, Nursing Consultant Institutional

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit J
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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.

Jamie Singer
Residential Care Services

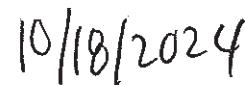
10/15/2024
Date

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.

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Administrator (or Representative)



Date

WAC 388-78A-2130 Service agreement planning. The assisted living facility must:

(5) Involve the following persons in the process of developing and updating a negotiated service agreement:

- (a) The resident;
- (b) The resident's representative to the extent he or she is willing and capable, if the resident has one;
- (6) Ensure:
 - (a) Individuals participating in developing the resident's negotiated service agreement:
 - (i) Discuss the resident's assessed needs, capabilities, and preferences; and
 - (ii) Negotiate and agree upon the care and services to be provided to support the resident; and

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to include 1 of 3 sampled residents (Resident 2) or their representative when updating and reviewing the Resident Service Plan (RSP-equivalent to Negotiated Service Agreement). This failure placed Resident 2 at risk for not receiving the appropriate care and services.

Findings included...

Record review of an Assessment, dated 09/17/2024, showed the ALF admitted Resident 2 on [REDACTED] /2023 with multiple medical diagnoses including [REDACTED].

Record review showed the ALF completed a RSP, dated 03/14/2023, that was reviewed and signed by Resident 2's representatives.

In an interview, on 09/30/2024 at 9:05 AM, Staff B (Assisted Living Director) stated in the ALF's computerized care planning tool Staff C (former Memory Care Director) updated Resident 2's RSP on 05/27/2023, 09/08/2023, 12/01/2023, 02/22/2024, and 05/27/2024.

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Record review showed the RSP's updated on 05/27/2023, 09/08/2023, 12/01/2023, 02/22/2024, and 05/27/2024 had not been reviewed or signed by Resident 2's representative.

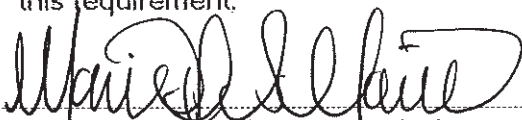
In an interview, on 09/25/2024 at 11:10 AM, Collateral Contact 2 (CC2- Resident 2's Family Representative) stated they had not been asked to review the Resident 2's RSP in over a year and half ago. CC2 stated that she had not seen or reviewed or agreed with the RSPs dated 05/27/2023, 09/08/2023, 12/01/2023, 02/22/2024, and 05/27/2024.

In an interview, on 09/30/2024 at 9:05 AM, Staff B stated that Staff C had a difficult time speaking with families about care costs generated by the RSPs so would not review them with residents or their families.

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, NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY is or will be in compliance with this law and / or regulation on (Date) NOV 21, 2024.

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


Administrator (or Representative)

10/18/2024
Date

WAC 388-78A-2150 Signing negotiated service agreement. The assisted living facility must ensure that the negotiated service agreement is agreed to and signed at least annually by:

- (1) The resident, or the resident's representative if the resident has one and is unable to sign or chooses not to sign;
- (2) A representative of the assisted living facility duly authorized by the assisted living facility to sign on its behalf; and
- (3) Any public or private case manager for the resident, if available.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure either the resident or their representative and an authorized representative from the ALF signed the Negotiated Service Agreement (NSA) for 1 out of 3 sampled residents (Resident 1). This failure placed Resident 1 at risk for not receiving care and services

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that had been agreed upon.

Findings included...

Record review of the ALF's policy, "Resident Service Plan Scheduling Policy", dated 08/2009, showed it was the policy to have the Resident Care Coordinator, Registered Nurse, Executive Director, at least two of these staff attend the service plan meetings with the residents and families. A service plan meeting would be held 30 days after moving in, and then every 90 days thereafter. If the family could not attend at the scheduled time, the meeting would still be held. If the family still was not able to attend at any time and there were increases in services, the Executive Director would send the revised financial agreement to the family to ensure their signature and understanding of their future increased charges.

Record review of an Assessment, dated 05/29/2024, showed the ALF admitted Resident 1 on [REDACTED]/2015 with multiple medical diagnoses.

Record review of Resident 1's Resident Service Plans (RSP equivalent to an NSA), dated 01/30/2024, 04/28/2024, and 09/19/2024 showed no signatures from Resident 1, their representative or a representative of the ALF on the section devoted to signatures.

In an interview, on 09/26/2024 at 1:15 PM, Collateral Contact 1 (CC1-Resident 1's Family Representative) stated that they had not been asked to sign the RSP with each change in care, nor had the contents been shared with them.

In an interview, on 09/25/2024 at 11:37 AM, Staff A (Executive Director) confirmed Resident 1's RSP was missing a signature from the resident, their representative or an ALF representative.

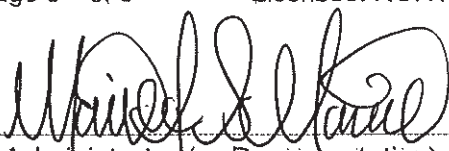
This a recurring deficiency previously cited on 06/26/2023 and 09/26/2023.

Plan/Attestation Statement

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

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COMMUNITY LLC


Administrator (or Representative)

10/18/2024
Date