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

08/05/2025

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) 62523 (Completion Date 08/05/2025) and 59594 (Completion Date 06/09/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 08/05/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
**WAC 388-78A-2320 Intermittent nursing services systems.**

(1) When an assisted living facility provides intermittent nursing services to any resident, either directly or indirectly, the assisted living facility must:

(a) Develop and implement systems that support and promote the safe practice of nursing for each resident; and

(2) The assisted living facility providing nursing services, either directly or indirectly, must ensure that the nursing services systems include:

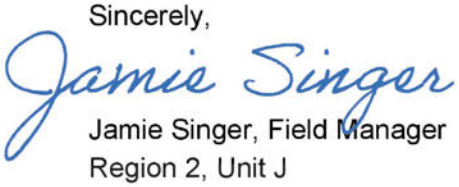
(a) Nursing services supervision;

(b) Nurse delegation, if provided;

The Department staff who did the On Site verification:
Michelle Mcglon, Nursing Consultant Institutional

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

Sincerely,



Jamie Singer, Field Manager
Region 2, Unit J
Residential Care Services

# Residential Care Services
## Investigation Summary Report

**Provider/Facility:** NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
**License/Cert.#:** 1995
**Compliance Determination #:** 53861
**Investigator:** Michelle Mcglon
**Investigation Date(s):** 01/28/2025 through 03/17/2025
**Complainant Contact Date(s):**

**Provider Type:** Assisted Living Facility

**Intake ID:** 163974
**Region/Unit #:** RCS Region 2 / Unit J

**Allegation(s):**

1. The Assisted Living Facility (ALF) did not have the Named Resident (NR)'s routine and as needed medications available, resulting in a request for an urgent supply.
2. The ALF did not have a supervisor in charge of medication technicians.
3. The ALF did not destroy discontinued medications.

**Investigation Methods:**

| | |
|---|---|
| **Sample:** | Total residents: 66<br>Resident sample size: 2<br>Closed records sample size: 2 |
| **Observations:** | Identified resident<br>Residents<br>Resident rooms<br>Medication administration |
| **Interviews:** | Nursing staff<br>Family members<br>Executive Director |
| **Record Reviews:** | State reporting log<br>Facility policies<br>Resident Records |

**Investigation Summary:**

1. Interview and record review showed that the ALF failed to have the NR's medications available. Record review showed that the NR had missed medications due to non-availability. See Statement of Deficiency 03/05/2025.
2. In an interview, the ALF's nurse stated that the Assisted Living Director was on leave and supervised the medication technicians. Record review of the ALF's nurses' job description showed the nurse was to supervise the staff. Interview and record review showed the ALF nurse failed to ensure all staff were delegated prior to performing specific task that required nursing oversight and training. See Statement of Deficiency 03/17/2025.
3. Observation found discontinued medications in the cart. See Statement of

Deficiency 03/05/2025.

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**Conclusion / Action:**

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

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 # 59594 |
|---|---|---|
| Plan of Correction | NORTH CREEK RETIREMENT & ASSISTED LIVING | Completion Date |
| Page 1 of 6 | Licensee: NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY LLC | 06/09/2025 |

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 05/29/2025, 06/02/2025 and 05/14/2025 of:
NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
1907 201ST PLACE SE
BOTHELL, WA 98012

This document references the following SOD dated: 06/09/2025

The following sample was selected for review during the unannounced on-site visit: 3 of 57 current residents and 0 former residents.

The department staff that inspected 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

| Statement of Deficiencies | License # 1995 | Compliance Determination # 539594 |
|---|---|---|
| Plan of Correction | NORTH CREEK RETIREMENT & ASSISTED LIVING | Completion Date |
| Page 2 of 6 | Licensee: NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY LLC | 06/09/2025 |

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

06/23/2025
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.

Todd Margen
Administrator (or Representative)

6/30/25
Date

**WAC 388-78A-2320 Intermittent nursing services systems.**

(1) When an assisted living facility provides intermittent nursing services to any resident, either directly or indirectly, the assisted living facility must:

(a) Develop and implement systems that support and promote the safe practice of nursing for each resident; and

(2) The assisted living facility providing nursing services, either directly or indirectly, must ensure that the nursing services systems include:

(a) Nursing services supervision;

(b) Nurse delegation, if provided;

**This requirement was not met as evidenced by:**

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 3 of 3 residents (Resident 1, 2, and 3) had Nurse Delegation (ND) in place prior to non-licensed staff administering medications. This failure resulted in Residents 1, 2, and 3 in receiving medications from staff not delegated to provide skilled tasks and placed them at risk of harm.

Findings included:

NOTE: The Nurse Delegation Program, under Washington State law, allows credentialed Nursing Assistants and Home Care Aides working in DSHS community-based residential care settings to perform certain tasks such as administration of prescription medications or blood glucose testing normally performed only by licensed nurses. A Registered Nurse must teach and supervise the Nursing Assistant or Home Care Aide, as well as provide nursing assessments of the patient's condition.

NOTE: Washington Administrative Code (WAC) 246-840-930 Criteria for delegation (1) In community-based and in-home care settings, before delegating a nursing task, the

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

06/23/2025
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-2320 Intermittent nursing services systems.**

(1) When an assisted living facility provides intermittent nursing services to any resident, either directly or indirectly, the assisted living facility must:

(a) Develop and implement systems that support and promote the safe practice of nursing for each resident; and

(2) The assisted living facility providing nursing services, either directly or indirectly, must ensure that the nursing services systems include:

(a) Nursing services supervision;

(b) Nurse delegation, if provided;

**This requirement was not met as evidenced by:**

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 3 of 3 residents (Resident 1, 2, and 3) had Nurse Delegation (ND) in place prior to non-licensed staff administering medications. This failure resulted in Residents 1, 2, and 3 in receiving medications from staff not delegated to provide skilled tasks and placed them at risk of harm.

Findings included...

NOTE: The Nurse Delegation Program, under Washington State law, allows credentialed Nursing Assistants and Home Care Aides working in DSHS community-based residential care settings to perform certain tasks-such as administration of prescription medications or blood glucose testing-normally performed only by licensed nurses. A Registered Nurse must teach and supervise the Nursing Assistant or Home Care Aide, as well as provide nursing assessments of the patient's condition.

NOTE: Washington Administrative Code (WAC) 246-840-930 Criteria for delegation.(1) In community-based and in-home care settings, before delegating a nursing task, the

registered nurse delegator shall decide if a task is appropriate to delegate based on the elements of the nursing process: ASSESS, PLAN, IMPLEMENT, EVALUATE.ASSESS(2) The setting allows delegation because it is a community-based care setting as defined by Revised Code of Washington (RCW) 18.79.260 (3)(e)(i) or an in-home care setting as defined by RCW 18.79.260 (3)(e)(ii).(3) Assess the patient's nursing care needs and determine the patient's condition is stable and predictable. A patient may be stable and predictable with an order for sliding scale insulin or terminal condition. (4) Determine the task to be delegated is within the delegating nurse's area of responsibility. (5) Determine the task to be delegated can be properly and safely performed by the nursing assistant or home care aide. The registered nurse delegator assesses the potential risk of harm for the individual patient. (6) Analyze the complexity of the nursing task and determine the required training or additional training needed by the nursing assistant or home care aide to competently accomplish the task. The registered nurse delegator identifies and facilitates any additional training of the nursing assistant or home care aide needed prior to delegation. The registered nurse delegator ensures the task to be delegated can be properly and safely performed by the nursing assistant or home care aide.(7) Assess the level of interaction required. Consider language or cultural diversity affecting communication or the ability to accomplish the task and to facilitate the interaction.(8) Verify that the nursing assistant or home care aide:(a) Is currently registered or certified as a nursing assistant or home care aide in Washington state without restriction;(b) Has completed both the basic caregiver training and core delegation training before performing any delegated task;(c) Has evidence as required by the department of social and health services of successful completion of nurse delegation core training;(d) Has evidence as required by the department of social and health services of successful completion of nurse delegation special focus on diabetes training when providing insulin injections to a diabetic client; and(e) Is willing and able to perform the task in the absence of direct or immediate nurse supervision and accept responsibility for their actions.(9) Assess the ability of the nursing assistant or home care aide to competently perform the delegated nursing task in the absence of direct or immediate nurse supervision.(10) If the registered nurse delegator determines delegation is appropriate, the nurse:(a) Discusses the delegation process with the patient or authorized representative, including the level of training of the nursing assistant or home care aide delivering care.(b) Obtains written consent. The patient, or authorized representative, must give written, consent to the delegation process under chapter 7.70 RCW. Documented verbal consent of patient or authorized representative may be acceptable if written consent is obtained within 30 days; electronic consent is an acceptable format. Written consent is only necessary at the initial use of the nurse delegation process for each patient and is not necessary for task additions or changes or if a different nurse, nursing assistant, or home care aide will be participating in the process.

Record review of the ALF's policy titled, "Delegation", dated 10/11/2023, showed the RN shall not delegated to anyone who was not knowledgeable and proficient for the task delegated as well as appropriately credentialed to provide delegated tasks. For each delegation, the RN shall be responsible to verify credential status, provide training/education related to the tasks and associated disease processes, assess staff capability, task complexity, and associated risks. The delegating RN would verify that credentials and required certificates were present for all staff intended to perform delegated tasks prior to delegation. Documentation of such would be done using the "Nurse Delegation Credential Verification" form and include a current printout from the provider credential search and all required certificates (Delegation Core and Diabetes Specialty). Observations would be documented on the" Nurse Visit" form and kept in

the delegation binder. Theses initial observations are required for any newly delegated insulin administration or newly hired MT conducting delegated task. The delegating RN would use the following to document ongoing oversight of staff. A new "Nurse Visit" form will be completed for each resident every 90 days. A new "Credential Verification" form would be completed for each delegated staff every 90 days to confirm eligibility to be delegated.

Resident 1

Record review of a Resident Service Plan (RSP-equivalent to a Negotiated Service Plan), dated 04/09/2025, showed the ALF admitted Resident 1 on [redacted] 2024 with multiple medical diagnoses, including [redacted].

Record review of an Assessment, dated 03/12/2025, showed Resident 1 required Registered Nurse Delegation (RND) for blood glucose checks and insulin administration.

Record review of a 2025 April Medication Administration Record (MAR) showed a physician's order for blood glucose checks three time a day and before bedtime. Record review of the MAR showed a note, "delegated task to be completed by delegated staff only". The MAR showed an order for Insulin Lispro (fast-acting insulin used to manage high blood sugar levels) 6 units three times a day with meal, and a note "delegated task performed by delegated staff only". The MAR showed a physician's order for Lantus (a type of insulin used to treat diabetes) 20 units every night at bedtime, and a note "delegated task performed by delegated staff only".

Record review of a May 2025 MAR showed Staff A (Medication Technician ((MT))and Assisted Living Director) administered Resident 1's Insulin Lispro and performed blood glucose checks 12 times; Staff B (MT) administered Resident 1's Insulin Lispro and performed blood glucose checks 14 times; Staff C (MT) administered Resident 1's Insulin Lispro and performed blood glucose checks nine times; Staff D (MT and Memory Care Director) administered Resident 1's Insulin Lispro and performed blood glucose checks eight times; Staff E (MT) administered Resident 1's Insulin Lispro and performed blood glucose checks two times; Staff F (MT) administered Resident 1's Insulin Lispro and performed blood glucose checks one time.

Record review of a May 2025 MAR showed Staff C administered Resident 1's Lantus and performed blood glucose checks nine times; Staff F administered Resident 1's Lantus and performed blood glucose checks one time; Staff H administered Resident 1's Lantus and performed blood glucose checks one time.

Record review of ND documentation showed no delegation had been completed for Staff A, B, C, D, E, F, or H. ND documentation showed an initial ND nursing visit was completed for Staff G on 04/15/2025 for insulin administration however there was no documentation of the required diabetic delegation follow-up visits. The ND documentation did not include Resident 1 or their representative had consented to ND.

RESIDENT 2

Record review of RSP, dated 03/19/2025, showed the ALF admitted Resident 2 on [redacted] 2024 with multiple medical diagnoses including [redacted].

In an interview, on 06/02/2025 at 11:23 AM, Resident 2 stated she did not perform blood glucose checks independently Resident 2 stated the ALF staff were checking her blood glucose levels.

Record review of a May 2025 MAR showed Resident 2 had a physician's order to check blood glucose, every morning, prior to oral diabetic medication. The MAR showed that every day of May 2025, Resident 2's blood glucose had been checked by Staff A, D, G , and J (MT).

Record review of ND documentation showed no delegation had been completed for Staff A, D, G and J to perform blood glucose checks. The ND documentation did not include Resident 2 or their representative had consented to ND.

In an interview, on 06/02/2025 at 10:02 AM, Staff I (Regional Registered Nurse) confirmed that Resident 2 had not received ND and Staff A, D, G and J were performing blood glucose checks without being delegated.

RESIDENT 3

Record review of an RSP, dated 02/20/2025, showed the ALF admitted Resident 3 with multiple medical diagnoses including [redacted]. The RSP showed Resident 3 required ND to administer crushed medications.

Record review of a May 2025 MAR showed Resident 3 had four prescriptions routine mediations and ten as needed medications. The MAR showed all four prescription medications had an order note stating, "this is a delegated task only to be performed by trained delegated medication technicians". The MAR showed that every day of May 2025 Staff A, B, D, E, and F had documented as administering medications to Resident 3.

Record review of ND documentation showed no delegation had been completed for Staff A, B, D, E, and F to administer medications to Resident 3. The ND documentation did not include Resident 3 or their representative had consented to ND.

In an interview, on 05/29/2025 on 12:58 PM, Staff K (Registered Nurse Delegator) confirmed she had not completed ND for Residents 1, 2, and 3 correctly. Staff K stated that the ND paperwork was, "horrible, horrible". Staff K stated that she had no training on delegation. Staff K stated she was not even aware of all the MT's that were administering medications or performing blood glucose testing on the ALF residents. Staff K stated that she should not have accepted the role as the Registered Nurse Delegator. Staff K stated that she was led to believe she did not have a choice in taking on that role.

In an interview, on 05/15/2025 at 8:08 AM, Collateral Contact 1 (CC1- Registered Nurse Consultant) CC1 stated that none of the ALF MT's or residents had been appropriately delegated regardless of CC1's attempt to train ALF management and Staff K on the ND program. CC1 stated ALF staff, "competency was concern". CC1 stated that there was no experienced nursing staff at the ALF to oversee medication management and delegation.

This is an uncorrected deficiency previously cited on 03/17/2025 and recurring deficiency previously cited on 03/27/2025.

**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) 7/24/25 7/24/2025

SB confirmed POC date with Provider on 7/17/2025.

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

Tod Morgan
Administrator (or Representative)

6/30/25
Date

In an interview, on 05/29/2025 on 12:58 PM, Staff K (Registered Nurse Delegator) confirmed she had not completed ND for Residents 1, 2, and 3 correctly. Staff K stated that the ND paperwork was, "horrible, horrible". Staff K stated that she had no training on delegation. Staff K stated she was not even aware of all the MT's that were administering medications or performing blood glucose testing on the ALF residents. Staff K stated that she should not have accepted the role as the Registered Nurse Delegator. Staff K stated that she was led to believe she did not have a choice in taking on that role.

In an interview, on 05/15/2025 at 8:08 AM, Collateral Contact 1 (CC1- Registered Nurse Consultant) CC1 stated that none of the ALF MT's or residents had been appropriately delegated regardless of CC1's attempt to train ALF management and Staff K on the ND program. CC1 stated ALF staff, "competency was concern". CC1 stated that there was no experienced nursing staff at the ALF to oversee medication management and delegation.

This is an uncorrected deficiency previously cited on 03/17/2025 and recurring deficiency previously cited on 03/27/2023.

**Plan/Attestation Statement**

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

_____ _____

Administrator (or Representative) Date

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 #53861 |
|---|---|---|
| Plan of Correction | NORTH CREEK RETIREMENT & ASSISTED LIVING | Completion Date |
| Page 1 of 5 | Licensee: NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY LLC | 03/17/2025 |

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 02/12/2025 and 01/28/2025 of:

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

This document references the following complaint number(s): 163974

The following sample was selected for review during the unannounced on-site visit: 2 of 66 current residents and 2 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

3/18/2025
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)

3/22/25
Date

**WAC 388-78A-2320 Intermittent nursing services systems.**

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(a) Develop and implement systems that support and promote the safe practice of nursing for each resident; and

(2) The assisted living facility providing nursing services, either directly or indirectly, must ensure that the nursing services systems include:

(a) Nursing services supervision;

(b) Nurse delegation, if provided;

**This requirement was not met as evidenced by:**

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 1 staff (Staff B) had been delegated performing nursing tasks. This failure resulted in Staff B performing skilled tasks without delegation and placed Resident 1 and 2 at risk of harm.

Findings included...

NOTE: The Nurse Delegation Program, under Washington State law, allows credentialed Nursing Assistants and Home Care Aides working in DSHS community-based residential care settings to perform certain tasks-such as administration of prescription medications or blood glucose testing-normally performed only by licensed nurses. A Registered Nurse must teach and supervise the Nursing Assistant or Home Care Aide, as well as provide nursing assessments of the patient's condition.

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

3/18/2025
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

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**This requirement was not met as evidenced by:**

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 1 staff (Staff B) had been delegated performing nursing tasks. This failure resulted in Staff B performing skilled tasks without delegation and placed Resident 1 and 2 at risk of harm.

Findings included...

NOTE: The Nurse Delegation Program, under Washington State law, allows credentialed Nursing Assistants and Home Care Aides working in DSHS community-based residential care settings to perform certain tasks-such as administration of prescription medications or blood glucose testing-normally performed only by licensed nurses. A Registered Nurse must teach and supervise the Nursing Assistant or Home Care Aide, as well as provide nursing assessments of the patient's condition.

NOTE: Washington Administrative Code (WAC) 246-840-930Criteria for delegation.(1) In community-based and in-home care settings, before delegating a nursing task, the registered nurse delegator shall decide if a task is appropriate to delegate based on the elements of the nursing process: ASSESS, PLAN, IMPLEMENT, EVALUATE.ASSESS(2) The setting allows delegation because it is a community-based care setting as defined by Revised Code of Washington (RCW) 18.79.260 (3)(e)(i) or an in-home care setting as defined by RCW 18.79.260 (3)(e)(ii).(3) Assess the patient's nursing care needs and determine the patient's condition is stable and predictable. A patient may be stable and predictable with an order for sliding scale insulin or terminal condition. (4) Determine the task to be delegated is within the delegating nurse's area of responsibility. (5) Determine the task to be delegated can be properly and safely performed by the nursing assistant or home care aide. The registered nurse delegator assesses the potential risk of harm for the individual patient. (6) Analyze the complexity of the nursing task and determine the required training or additional training needed by the nursing assistant or home care aide to competently accomplish the task. The registered nurse delegator identifies and facilitates any additional training of the nursing assistant or home care aide needed prior to delegation. The registered nurse delegator ensures the task to be delegated can be properly and safely performed by the nursing assistant or home care aide.(7) Assess the level of interaction required. Consider language or cultural diversity affecting communication or the ability to accomplish the task and to facilitate the interaction.(8) Verify that the nursing assistant or home care aide:(a) Is currently registered or certified as a nursing assistant or home care aide in Washington state without restriction;(b) Has completed both the basic caregiver training and core delegation training before performing any delegated task;(c) Has evidence as required by the department of social and health services of successful completion of nurse delegation core training;(d) Has evidence as required by the department of social and health services of successful completion of nurse delegation special focus on diabetes training when providing insulin injections to a diabetic client; and(e) Is willing and able to perform the task in the absence of direct or immediate nurse supervision and accept responsibility for their actions.(9) Assess the ability of the nursing assistant or home care aide to competently perform the delegated nursing task in the absence of direct or immediate nurse supervision.(10) If the registered nurse delegator determines delegation is appropriate, the nurse:(a) Discusses the delegation process with the patient or authorized representative, including the level of training of the nursing assistant or home care aide delivering care.(b) Obtains written consent. The patient, or authorized representative, must give written, consent to the delegation process under chapter 7.70 RCW. Documented verbal consent of patient or authorized representative may be acceptable if written consent is obtained within 30 days; electronic consent is an acceptable format. Written consent is only necessary at the initial use of the nurse delegation process for each patient and is not necessary for task additions or changes or if a different nurse, nursing assistant, or home care aide will be participating in the process.

Resident 1
Record review of a Resident Service Plan (RSP), dated 11/26/2024, showed the ALF admitted Resident 1 on [redacted] 2022 with multiple medical diagnoses including [redacted]. Record review of the RSP showed the ALF was to provide medication administration and Resident 1 did not have a good understanding of their medications.

Record review of a December 2024 Medication Administration Record (MAR) showed that Resident 1 had a physician's order for Humalog sliding scale (a medication used to decrease blood sugar levels that is dosed according to blood sugar level before the meal). Review of the MAR showed Staff B (Medication Technician) had initialed they administered Resident 1's Humalog on seven occasions.

Record review of a December 2024 MAR showed that Resident 1 had a physician's order for Lantus (a medication used to decrease blood sugar) at bedtime. Review of the MAR showed Staff B had initialed they administered Resident 1's Lantus on two occasions.

Record review of a December 2024 MAR showed the Resident 1 had a physician's order for blood sugar checks (a measurement of the amount of sugar in the blood) five times per day. The Physician's Order Note stated, "This is a delegated task only." Review of the MAR showed that Staff B had initialed they took Resident 1's blood sugar level on 13 occasions.

Record review of a January 2025 MAR showed that Resident 1 had a physician's order for Humalog sliding scale before meals. Review of the MAR showed Staff B initialed they administered Resident 1's Humalog on two occasions.

Record review of a January 2025 MAR showed that Resident 1 had a physician's order for Lantus daily. Record review of the MAR showed Staff B initialed they administered Resident 1's Humalog on two occasions.

Resident 2
Record review of a RSP, dated 08/22/2024, showed the ALF admitted Resident 2 on [redacted]/2024 with multiple medical diagnoses including [redacted]. Record review of the RSP showed Resident 2 required staff support with blood sugar checks and insulin administration 3 to 4 times per day.

Record review of a January 2025 MAR showed that Resident 2 had a physician's order for blood sugar check three times per day. Physician's Order Notes stated, "This task has been delegated only to be completed by properly trained staff". Review of the MAR showed Staff B initialed they took Resident 2's blood sugar level on 27 occasions.

Record review of a January 2025 MAR showed Resident 2 had a physician's order for Insulin Lispro (a medication used to decrease blood sugar) three times per day with meals. The MAR showed this was a delegated task to be performed by delegated staff only. Record review of the MAR showed Staff B initialed they administered Resident 2's Lispro on 15 occasions.

Record review of a January 2025 MAR showed Resident 2 had a physician's order for Lantus every night at bedtime. The MAR showed this was a delegated task to be performed by delegated staff only. Record review of the MAR showed Staff B initialed they administered Resident 2's Lantus on 15 occasions.

Record review of Nurse Delegation documentation showed Staff A (Registered Nurse Delegator) had never delegated Staff B to administer injections, check Resident 1's blood sugar, or any other delegated task.

In an interview, on 01/28/2025 at 2:33 PM, Staff A confirmed that Staff B had not been delegated and was administering medications and checking blood sugars for Resident 1 and 2 without delegation.

This deficiency was previously cited on 03/27/2023.

**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) May 1, 2025

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

Administrator (or Representative) 3-22-25 Date

Record review of a January 2025 MAR showed Resident 2 had a physician's order for Lantus every night at bedtime. The MAR showed this was a delegated task to be performed by delegated staff only. Record review of the MAR showed Staff B initialed they administered Resident 2's Lantus on 15 occasions.

Record review of Nurse Delegation documentation showed Staff A (Registered Nurse Delegator) had never delegated Staff B to administer injections, check Resident 1's blood sugar, or any other delegated task.

In an interview, on 01/28/2025 at 2:33 PM, Staff A confirmed that Staff B had not been delegated and was administering medications and checking blood sugars for Resident 1 and 2 without delegation.

This deficiency was previously cited on 03/27/2023.

**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)_____ .

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

_____ _____

Administrator (or Representative) Date