



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

Pacwest Kennewick, LLC
Parkview Estates
7820 W 6th Ave
Kennewick, WA 99336

RE: Parkview Estates License # 2025

Dear Administrator:

This letter addresses Compliance Determination(s) 41516 (Completion Date 05/21/2024) and 38153 (Completion Date 03/22/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 05/21/2024 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-2210-2-a

The Department staff who did the on-site verification:
Elaine Lopez, Licensor

If you have any questions, please contact me at (509)993-7821.

Sincerely,

Stephanie Jenks, Field Manager
Region 1, Unit G
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: Parkview Estates

Provider Type: Assisted Living Facility

License/Cert.#: 2025

Compliance Determination #: 38153

Intake ID: 121017

Investigator: Elaine Lopez

Region/Unit #: RCS Region 1 / Unit G

Investigation Date(s): 03/13/2024 through 03/22/2024

Complainant Contact Date(s):

Allegation(s):

1. Medications were not being given, example of antibiotics not being completed for AV.
2. Medication orders were not being processed timely.
3. Medication Technicians do not really know what they are doing.
4. The facility nurse does not really seem to care.

Investigation Methods:

Sample:	Total residents: 116 Resident sample size: 4 Closed records sample size: 0
Observations:	The facility's common areas, sampled resident apartments, resident to resident and resident to staff interactions were observed.
Interviews:	Sampled residents, current residents, facility staff, and others not associated with the facility.
Record Reviews:	Resident characteristic roster, resident records (care plan, progress notes, medication administration records), incident investigations, pharmacy training, and staff roster.

Investigation Summary:

1. Interviews stated medication not given as prescribed, review of the facility's record, Medication Administration Records (MARS) showed that the AV's antibiotics were not given for the full 10-day course. Failed practice identified, WAC 388-78A- 2210, reference Statement of Deficiency dated 03/22/2024.
2. Interview with facility staff stated that they had a three-person review for the process of new medication orders. Additional facility staff interviews showed that they were unaware of medication orders not being processed timely.
3. Interview with facility staff stated that their pharmacy provides monthly training to the Medication Technicians (MTs) in addition to audits the medication cart and the electronic record. Review of the facility's pharmacy training log showed that MT's were trained. Review of the facility's staff training showed that the MT's had the required nurse delegation core and diabetes training.
4. Interview with the facility administrative staff stated that they have not had any staff

complaints regarding the nurse.

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 #: 2025	Compliance Determination # 38153
Plan of Correction	Parkview Estates	Completion Date
Page 1 of 3	Licensee: Pacwest Kennewick, LLC	03/22/2024

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 03/13/2024 and 03/13/2024 of:

Parkview Estates
7820 W 6th Ave
Kennewick, WA 99336

This document references the following complaint number(s): 121017

The following sample was selected for review during the unannounced on-site visit: 4 of 116 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Elaine Lopez, Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit G
1200 Alder Street
Union Gap, WA 98903

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.

Grwin Kaercher
Residential Care Services

03/26/2024
Date

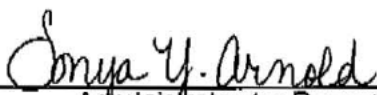
I understand that to maintain an Assisted Living Facility license, the facility must be in compliance with all the licensing laws and regulations at all times.

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

03.26.2024 15:34:10

State of Washington

Statement of Deficiencies	License #: 2025	Compliance Determination # 38153
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Administrator (or Representative)

3.29.2024

Date

WAC 388-78A-2210 Medication services.

(2) The assisted living facility must ensure the following residents receive their medications as prescribed, except as provided for in WAC 388-78A-2230 and 388-78A-2250 :

(a) Each resident who requires medication assistance and his or her negotiated service agreement indicates the assisted living facility will provide medication assistance; and

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to provide medications as prescribed for 1 of 2 residents (Resident 1). This failure placed the resident at risk of health complications due to not receiving the correct doses per physician orders.

Findings included...

Resident 1's 01/10/2024 Negotiated Service Agreement (NSA) showed that the resident required staff assistance with medication management and that the Medication Technician (MT) managed and administered oral medication. Resident 1's record included diagnoses of [REDACTED], [REDACTED], and [REDACTED].

Resident 1's record showed a local hospital doctor's order dated 02/04/2024 for Doxycycline (antibiotic medication – used to treat infections) 100 Milligrams (MG), give one tablet twice a day for 7 days. The record also showed a prescription from the resident's primary care doctor dated 02/12/2024 for Doxycycline 100 mg give one tablet twice a day for 10 days for abscess (a pocket of pus that collects in the body that is infected).

Resident 1's primary care doctor ordered another prescription dated 02/26/2023 for Doxycycline 100 mg, give one tablet twice a day for 10 days, start 02/27/2024 through 03/07/2024, dispense 20 tablets.

Review of the February 2024 Medication Administration Record (MAR) showed an order for Doxycycline 100 mg give one tablet twice a day for seven days. The February MAR documented that the Doxycycline was started the morning of 02/05/2024 and the antibiotic was given through 02/11/2024, for a total of seven days.

The February 2024 MAR did not show the Doxycycline prescription that was ordered on

03.26.2024 15:34:10

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02/12/2024 that was to be given for a 10-day course.

Review of the March 2024 MAR showed an order for Doxycycline 100 mg give one tablet twice a day for seven days with a start date of 03/02/2024. The March MAR documented that the Doxycycline was started the morning of 03/02/2024 and was given through 03/08/2024, for a total of seven days and not the 10 days as ordered by the doctor from the 02/26/2024 prescription.

On 03/13/2024 at 11:40 AM, Staff A, Licensed Practical Nurse (LPN), stated they were unsure why the antibiotics was not given for the full 10-day course.

On 03/14/2024 at 4:35 PM, Collateral Contact 1 (CC1), stated that in February 2024, - it was noted that Resident 1's bottle of Doxycycline had two pills remaining in the bottle. The MT on duty had informed CC1 that the resident had finished the course of antibiotics. CC1 stated, "I wrote another course (of antibiotic treatment), I came back one week later, and it wasn't healing as good as I thought it should."

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, Parkview Estates is or will be in compliance with this law and / or regulation on (Date) 5.6.2024.

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

Sonya Y. Arnold

Administrator (or Representative)

3.29.2024

Date