STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave Ste 200, Vancouver, WA 98684

06/03/2025

Bonaventure of Lacey LLC
Bonaventure of Lacey
3425 Boone Rd SE
Salem, OR 97317

RE: Bonaventure of Lacey # 2036

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 60501 (Completion Date 06/03/2025) and 53875 (Completion Date 03/04/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 06/03/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2210 Medication services.

(1) An assisted living facility providing medication service, either directly or indirectly, must:

(a) Meet the requirements of chapter 69.41 RCW Legend drugs Prescription drugs, and other applicable statutes and administrative rules; and

(b) Develop and implement systems that support and promote safe medication service for each resident.

(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

(b) If the assisted living facility provides medication administration services, each resident who requires medication administration and his or her negotiated service agreement indicates the assisted living facility will provide medication administration.

WAC 388-78A-2160 Implementation of negotiated service agreement. The assisted living facility must provide the care and services as agreed upon in the negotiated service agreement to each resident unless a deviation from

the negotiated service agreement is mutually agreed upon between the assisted living facility and the resident or the resident's representative at the time the care or services are scheduled.

The Department staff who did the On Site verification:

Pamela Horlick, NCI RN Complaint Investigator
Anissa Bearden, Licensor

If you have any questions, please contact me at (360)450-1218.

Sincerely,

Clinton Fridley

Clinton Fridley, Adult Family Home Nurse Field Manager
Region 3, Unit E
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: Bonaventure of Lacey
Provider Type: Assisted Living Facility
License/Cert.#: 2036
Compliance Determination #: 53875
Intake ID: 163806
Investigator: Pamela Horlick
Region/Unit #: RCS Region 3 / Unit E
Investigation Date(s): 01/29/2025 through 03/04/2025
Complainant Contact Date(s):

Allegation(s):

Quality of Care/Treatment: Report of resident being left soiled for hours, food and drinks out of reach, resident being found on the floor.

Investigation Methods:

Sample:
Total residents: 65
Resident sample size: 4
Closed records sample size: 0

Observations:
Identified resident
Residents
Activities
Dining
Resident rooms
Staff to resident interactions
Resident to resident interactions
Medication administration

Interviews:
Identified resident
Nursing staff
Residents
Family members

Record Reviews:
State reporting log
Facility policies
CarePlan
progress notes
PCP orders
hospice notes
assessment
disclosure of services
characteristic roster

Investigation Summary:

Facility has process in place to check on resident every 2 hours to include brief change. Food and drinks on bedside table within reach at head of bed. Unable to substantiate failed practice.

Facility had orders to utilize fall mat for when resident slid off bed, fall mat observed not being used. Failed practice identified.
Record review and interview confirmed resident was not getting their medication and prescriber was not notified. Failed practice identified.

Conclusion / Action:

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

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DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

800 NE 136th Ave Ste 200, Vancouver, WA 98684

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 01/29/2025 and 03/04/2025 of:

Bonaventure of Lacey
4528 Intelco Loop SE
Lacey, WA 98503

This document references the following complaint number(s): 163806, 164189, 164157

The following sample was selected for review during the unannounced on-site visit: 4 of 65 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Pamela Horlick, NCI RN Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit E
800 NE 136th Ave Ste 200
Vancouver, WA 98684

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.

Cory Cisneros
Residential Care Services

03/17/2025
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)

3/17/2025
Date

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This requirement was not met as evidenced by:

Based on interview and record review the facility failed to implement systems that promotes safe medication services for 1 of 3 (Resident 1[R1]) residents when the resident refused or the medication was unavailable. This failure placed R1 at risk for unmet care needs.

Findings included...

WAC 388-78A-2230 "Medication refusal. (1) When a resident who is receiving

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Findings included...

WAC 388-78A-2230 "Medication refusal. (1) When a resident who is receiving

medication assistance or medication administration services from the assisted living facility chooses to not take his or her medications, the assisted living facility must: ... (c) Notify the physician of the refusal and follow any instructions provided, unless there is a staff person available who, acting within his or her scope of practice, is able to evaluate the significance of the resident not getting his or her medication, and such staff person; ... (ii) Takes the appropriate action, including notifying the prescriber or primary care practitioner when there is a consistent pattern of the resident choosing to not take his or her medications."

Review of the facility policy, titled, "Health Services", dated 05/01/2023, under the section, "Refused Medication," stated, "Notification will be provided to the prescribing physician by the MT/QMAP [Medication Technician/Qualified Medical Administration Person] when a resident refuses an ordered medication or treatment and follow directions about reporting subsequent refusals."

Review of the facility policy, titled, "Health Services," dated 05/01/2023, under the section, "Med Pass Exceptions", showed, "In the event for any reason a medication/treatment is unable to be executed for a resident the MT/QMAP will document using the "exceptions" options available for use in the med pass process... within the shift, faxes will be sent to the residents physician for required notification of meds/treatments not executed... MT/QMAP should document either in the med pass screen as a note or as an entry in the resident chart notes of the reason for the exception and MD notification."

Review of R1's face sheet, undated, showed that R1 was admitted to the facility on [redacted] 2022.

Review of R1's Medication Administration Record (MAR), dated January of 2025, showed take one Levofloxacin (used to treat bacterial infections) tablet daily by mouth for 10 days for "bacterial infection" on 01/20/2025. The following doses were not given and the reason for dose not given:

-01/21/2025- Under "Reason" showed "Medication not arrived." Under "Notes" showed "New med has not arrived."
-01/22/2025- Under "Reason" showed "Resident refused." Under "Notes" showed "Resident refused all meds 3Xs approached"
-01/23/2025- Under "Reason" showed "Resident refused." Under "Notes" showed "Resident refused three attempts made."
-01/24/2025- Under "Reason" showed "Medication not arrived." Under "Notes" showed "Med not in cart."
-01/25/2025- Under "Reason" showed "Medication not arrived." Under "Notes" showed "could not find in cart."
-01/27/2025- Under "Reason" showed "Resident refused." Under "Notes" showed "Resident refused all medications."
-01/29/2025- Under "Reason" showed "Resident refused." Under "Notes" showed "Resident is refusing to take."

Record review of R1's progress note, dated 12/30/2024 through 01/29/2025 showed:

-01/20/2025- resident on alert charting for a new antibiotic. R1's POA (Power of Attorney) brought in R1's antibiotic for them to start today. R1 was to start Levofloxacin. "Please look for the following symptoms for excruciating pain in feet, shaking, vision changes, severe headaches, vomiting and fever."
-01/21/2025 1:45AM-Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed "Resident does not appear to show any side effects from medication"
-01/21/2025 9:53 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed "No adverse reactions apparent at this time"
01/21/2025 11:40 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed "resident is not showing any of the following signs or symptoms of this medication affecting her negatively: nausea, vomiting, light colored stools, stomach pain, or yellowing of the eyes or skin will continue to observe."
01/22/2025 1:33 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed "Legs continue to drain. Resident refused A.M. meds."
01/22/2025 11:50 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed "Resident didn't seem to have nausea, vomiting, diarrhea, resident relaxed in bed all shift."
01/23/2025 5:56AM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed "Resident has swelling on her leg and a small wound open on the foot. Resident has some fluid seeping from her legs."
01/23/2025 11:04 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed "Resident seemed not to have nausea, vomiting, diarrhea, headache, fever."
01/24/2025 6:31 AM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed "Resident is not experiencing any negative signs or symptoms from receiving this medication at this time will continue to observe."
01/24/2025 10:16PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident seemed not to have nausea, vomiting, diarrhea, headache, dizziness."
01/25/2025 5:52 AM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident is not showing any adverse signs or symptoms affecting [them] negatively from taking this medication."
01/25/2025 1:48 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident seems to be doing good on medication. Resident has not complained or shown any signs or symptoms of diarrhea, constipation, headache, dizziness, or insomnia."
01/25/2025 9:48 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident has not shown symptoms on new medication"
01/26/2025 5:26 AM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident still has seeping from the infection. Residents leg is still has redness and swelling. Resident is not experiencing

any negative side affects from receiving this medication. It seems to be helping the wound heal on the outside."
01/26/2025 1:18 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident has not experienced any negative side effects to mediation."
01/26/2025 9:39 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident has not experienced any negative side effects to mediation."
01/27/2025 3:09 AM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident does not appear to show any side effects from mediation at this time."
01/27/2025 1:35 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Refused AM meds, took noon Tylenol. No PRN's needed."
01/27/2025 8:55 PM-Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident has not had any side effects on mediation so far that staff has observed."
01/28/2025 2:44 AM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident does not appear to show any side effects from starting mediation."
01/28/2025 1:38 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "No signs of fever, redness, or swelling."
01/28/2025 10:37 PM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident seems to be doing well on medication so far. Resident has not complained of any symptoms after starting medications."
01/29/2025 1:39 AM- Under "Order" showed "Alert charting for: Start of Levofloxacin for infection x10 days" Under "Notes" showed, "Resident appears to not show any side effects from starting medication at this time."

In an interview on 01/29/2025 at 12:10 PM, Staff D, Medication Aide, was asked what they would do if a resident they were passing medications to refused, they stated they would fax the doctor and let management know.

In an interview on 02/07/2025 at 2:47 PM, Staff B, Memory Care Director, was asked what the process was when a resident refused their medications, they stated, they would attempt three times to give them the medication and if they still refused then we will waste the medication. Staff B was asked if they would notify anyone, they stated, the medication aide would notify the manager and fax the ordering physician. Staff B was asked what they would do if the resident was on hospice, they stated, they would notify the hospice nurse. Staff B was asked when they would notify the prescriber, they stated, after the three attempts. Staff B stated if the resident refused again the next day, they would notify the prescriber or hospice nurse again for that day. Staff B stated every day that a resident was missing their medications they would notify the primary care provider (PCP) or the hospice nurse.

Records request on 02/07/2025 at 2:47 PM, Staff B, was asked to provide the notifications of the refusals to R1's hospice nurse. None were provided.

In an interview on 02/10/2025 at 4:03 PM, Staff A, Executive Director, stated they talk to R1's nurse every day and there should be faxes to the doctor. Requested faxes from the facility to R1's prescriber notifying of the refusals. None were provided.

Record review of an email, dated 02/13/2025, showed Staff A responding to the request for R1s medication refusals and that staff A provided hospice notes.

Review of R1's hospice notes, dated 12/26/2024 through 02/13/2025 showed:

-01/20/2025- the medication Levoquin (Levofloxacin) was added to the residents medication regimen.
-01/21/2025- Medication Tech reports adequate supply of medications on hand. "Patient refuses meds at times"
-01/22/2025- no mention of resident refusing antibiotic
-01/23/2025- no mention of resident refusing antibiotic
-01/24/2025- "Patient has weeping from right leg, redness has improved with antibiotic use."
-01/27/2025- no mention of resident refusing antibiotic.
-01/29/2025- no mention of resident refusing antibiotic. "Hydromorphone urgently filled at QFC. Med tech reported "We ran out".
01/30/2025- The skin to R1's right leg and foot was bright red. They had an antibiotic to be given but has been refusing.

There are no other notes that hospice was made aware of the resident refusing levofloxacin or other medications.

In an interview on 02/18/2025, Staff A stated, they did talk to hospice and informed them of R1 refusing their medications. Staff A stated that they did not write any notes that they notified hospice. Staff A stated the medication aide should have reported that R1 wasn't taking their medications.

In an interview on 01/30/2025 at 4:31 PM, Collateral Contact 1 (CC1), Hospice Nurse, stated they were told that R1's leg was getting worse. CC1 stated the antibiotic (Levofloxacin) was prescribed on 01/20/2025. CC1 stated Staff B just told them today (01/30/2025) that R1 hadn't been getting it because R1 was refusing it. CC1 stated they had no idea until today.

This is a recurring deficiency previously cited on 05/31/2023 and 12/13/2022 for subsections (1)(b)(2)(b).

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, Bonaventure of Lacey is or will be in compliance with this law and / or regulation on (Date) 4/18/2025

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

Administrator (or Representative) 3/17/25 Date

WAC 388-78A-2160 Implementation of negotiated service agreement. The assisted living facility must provide the care and services as agreed upon in the negotiated service agreement to each resident unless a deviation from the negotiated service agreement is mutually agreed upon between the assisted living facility and the resident or the resident's representative at the time the care or services are scheduled.

This requirement was not met as evidenced by:

Based on observation, record review and interview the facility failed to provide the care and services to meet the residents needs for 1 of 3 (Resident 1 [R1]). This failure placed R1 at risk for injury and unmet care needs.

Findings included...

Review of R1's face sheet, undated, showed that R1 was admitted to the facility on [redacted] 2022.

In a records request on 02/27/2025, a policy related to the use of assistive devices such as a fall mat was requested and not provided.

In a records request on 02/28/2025, a policy related to the use of assistive devices, such as a fall mat was requested and not provided.

Record review of R1's Negotiated Services Agreement (NSA), dated 01/01/2025, showed there was no documentation of a fall mat.

In an email, dated 02/27/2025, Staff A, Executive Director stated the use of an assistive device would be reflected on the individual resident's service plan or may be initially

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In an email, dated 02/27/2025, Staff A, Executive Director stated the use of an assistive device would be reflected on the individual resident's service plan or may be initially

and temporarily referenced on a TCP (Temporary Care Plan.)

Record review of R1's Temporary Care Plan (TCP), dated 01/08/2025, under the section, "what interventions/additional services will be provided," showed, "Fall mat is in place while resident is in bed."

Record review of R1's progress note, date range from 12/30/2024 through 01/29/2025 showed:
-01/08/2025: An order was received via fax for a fall mat

Record review of an order for R1 from Assured Hospice, dated 01/07/2025 showed a fall mat was ordered.

In an observation on 01/29/2025 at 10:20 AM, R1 was observed lying in bed with their left leg hanging off the bed. No fall mat was on floor next to the bed.

In an observation on 01/29/2025 at 11:48 AM, R1 was observed with both legs hanging off the bed. No fall mat was on the floor next to the bed.

In an observation on 01/29/2025 at 12:50 PM, no fall mat was observed to be on the floor next to the bed.

In an interview on 01/29/2025 at 1:47 PM, Staff C, Caregiver, was asked if R1 had a fall mat, they stated, yes, their leg was leaking so we moved it. Staff C stated, they thought it was in their closet.

In an interview and observation on 01/29/2025 at 1:06 PM, Staff B, Memory Care Director, was asked what interventions were in place due to R1 sliding out of bed, they stated there was a fall mat. Staff B was asked if the fall mat was out all day and all night, they stated, yes, it should be. R1's room was observed to not have a fall mat in front of the bed. Staff B stated it was not out in front of the bed but it was under the bed. Staff B was asked if the fall mat should always be out in front of the bed, they stated, yes, [care staff] may have pushed it under when they changed R1's brief.

In an interview on 01/29/2025 at 1:59PM, Staff A, Executive Director, was asked what the process was when a fall mat was put in place for a resident, they stated there was a doctors order for one and it would be found in the chart. Staff A stated no one in Assisted Living had a fall mat. Staff A asked who had one, Staff A was informed that R1 had one. Staff A stated they were not made aware of a fall mat for R1. Staff A stated if hospice ordered it then they would have an order for it.

Statement of Deficiencies	License # 2036	Compliance Determination # 538/6
Plan of Correction	Bonaventure of Lacey	Completion Date
Page 9 of 9	Licensee: Bonaventure of Lacey LLC	03/04/2025

Plan/Attestation Statement

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Administrator (or Representative) — Date 3/17/25

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