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

SEA MAR COMMUNITY HEALTH CENTERS
THE CANNON HOUSE
113 23rd AVENUE SOUTH
SEATTLE, WA 98144

RE: THE CANNON HOUSE License # 2056

Dear Administrator:

This letter addresses Compliance Determination(s) 29733 (Completion Date 09/21/2023) and 26973 (Completion Date 07/27/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/21/2023 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-2210-1-b, WAC 388-78A-2210-2, WAC 388-78A-2350-7-b

The Department staff who did the on-site verification:
Lisa Hauk, Complaint Investigator

If you have any questions, please contact me at (425)670-6070.

Sincerely,

Jamie Singer

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

Residential Care Services
Investigation Summary Report

Provider/Facility: THE CANNON HOUSE
Provider Type: Assisted Living Facility
License/Cert.#: 2056
Compliance Determination #: 26973
Intake ID: 89031
Investigator: Lisa Hauk
Region/Unit #: RCS Region 2 / Unit J
Investigation Date(s): 07/20/2023 through 07/27/2023
Complainant Contact Date(s):

Allegation(s):

The Assisted Living Facility (ALF) did not have manual equipment to take the Named Resident's (NR) blood pressure so the ALF used electronic blood pressure monitors resulting in inaccurate vital sign data.

Investigation Methods:

Sample:	Total residents: 67 Resident sample size: 2 Closed records sample size: 0
Observations:	Common areas clean and free of clutter, resident to resident interactions, staff to resident interactions, vital sign equipment, medication pass, resident apartments.
Interviews:	Administrator, nurses, staff and residents.
Record Reviews:	Resident characteristics roster, resident records.

Investigation Summary:

Interview and observation showed staff did have an automatic wrist blood pressure cuff, but also had a manual blood pressure cuff and stethoscope available to use when needed or requested by the residents. The ALF used manual vital sign equipment for the NR at all times. Medication assistance findings. See citation 388-78A-2350 (7)(b) and 388-78A-2210 (1)(b)(2).

Conclusion / Action:

- [x] 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 #: 2056	Compliance Determination # 26973
Plan of Correction	THE CANNON HOUSE	Completion Date
Page 1 of 4	Licensee: SEA MAR COMMUNITY HEALTH CENTERS	07/27/2023

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 07/20/2023 and 07/20/2023 of:

THE CANNON HOUSE
113 23rd AVENUE SOUTH
SEATTLE, WA 98144

This document references the following complaint number(s): 89031

The following sample was selected for review during the unannounced on-site visit: 2 of 67 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Lisa Hauk, Complaint Investigator

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

08/09/2023
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)

8/17/23
Date

WAC 388-78A-2210 Medication services.

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

(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 :

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to follow physician's orders to hold 1 of 2 sampled resident's (Resident 1) medication when their blood pressure (BP) was below parameters. This failure resulted in Resident 1 not receiving medications as prescribed and placed Resident 1 at risk of health complications due to low blood pressure.

Findings included...

Record review showed the ALF admitted Resident 1 on [redacted]/2023 with diagnoses of [redacted] and [redacted]. Review of an Assessment, dated 03/24/2023, showed the ALF assisted Resident 1 with medications.

Record Review of Resident 1's Medication Administration Record (MAR) for June 2023 and July 2023 showed a physician's order for Propranolol HCL (a medication used to treat high BP, irregular heartbeats, shaking/tremors, and other conditions) 10 milligrams twice daily with parameters to hold the medication for systolic BP (the top number measures the pressure in your arteries when your heart beats) under 100 or heart rate under 60.

Review of the June MAR showed Resident 1's systolic BP was below 100 on 16 out of 30 days. Resident 1's Propranolol HCL was marked as given on four of the 16 days when it should have been held per the physician's parameters. Resident 1's BP was below 100 on 15 out of 30 evenings but Propranolol HCL was marked as given three of the 15 days it should have been held per the physician's parameters.

Review of the July MAR showed systolic BP was below 100 on 10 out of 19 evenings but Propranolol HCL was marked as given on two of the 10 evenings it should have been held.

Interview, on 07/20/2023 at 2:14 PM, Staff B (Registered Nurse) confirmed that staff were to hold Resident 1's Propranolol HCL when BP was below the physician's ordered parameters.

This is a recurring citation previously cited on 02/11/2022, 06/06/2022 and 02/08/2023.

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, THE CANNON HOUSE is or will be in compliance with this law and / or regulation on (Date) 09/08/2023 .

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

Administrator (or Representative) — Date: 8/17/23

WAC 388-78A-2350 Coordination of health care services.

(7) When coordinating care or services, the assisted living facility must:

(b) Respond appropriately when there are observable or reported changes in the resident's physical, mental, or emotional functioning.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to follow physician ordered parameters for 1 of 2 sampled resident's (Resident 1). This resulted in Resident 1's physician being unaware of low blood pressure results and placed them at risk of health complications.

Findings included...

Record review showed the ALF admitted Resident 1 on [redacted]/2023 with diagnoses of [redacted] and a [redacted]. Review of an Assessment, dated 03/24/2023, showed the ALF assisted Resident 1 with medications and their pulse and blood pressure (BP) twice daily. Interventions on the Assessment included, "Monitor vital signs monthly or as ordered by MD. Report results to nurse." A goal listed on Resident 1's assessment included, "The resident will remain free of signs and symptoms of hypotension."

Record Review of Resident 1's Medication Administration Record for June 2023 and July 2023 showed a physician's order for Propranolol HCL (a medication used to treat high blood pressure, irregular heartbeats, shaking/tremors, and other conditions) 10 milligrams

twice daily with parameters to hold the medication for systolic BP (the top number measures the pressure in your arteries when your heart beats) under 100 or heart rate under 60. Review of the June MAR showed Resident 1's systolic BP was below 100 on 16 out of 30 days and 15 out of 30 evenings. Review of the July MAR showed systolic BP was below 100 on 10 out of 19 evenings.

Record review of June 2023 and July 2023 Progress Notes showed Resident 1's physician was notified once of low BP on 07/12/2023 at 1:30 PM. There was no other documentation to show that Resident 1's physician had been notified about the repeated low BPs in June and July.

In interview, on 07/21/2023 at 1:13 PM, Staff A (Resident Care Manager) stated, "I don't think they notified the doctor every time the meds were held."

This is a deficiency previously cited on 06/06/2022.

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, THE CANNON HOUSE is or will be in compliance with this law and / or regulation on (Date) 9/8/23 .

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

Administrator (or Representative) — Date: 8/17/23