



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

08/04/2023

LIGHTHOUSE MEMORY CARE LLC
LIGHTHOUSE MEMORY CARE
3502 K AVENUE
ANACORTES, WA 98221

RE: LIGHTHOUSE MEMORY CARE License # 2204

Dear Administrator:

This letter addresses Compliance Determination(s) 27320 (Completion Date 07/28/2023) and 23421 (Completion Date 05/17/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/28/2023 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-2480-1, WAC 388-78A-2305-1, WAC 246-215-03306-1-d

The Department staff who did the on-site verification:
Cristina Gonzalez, ALF Licenser

If you have any questions, please contact me at (360)651-6846.

Sincerely,

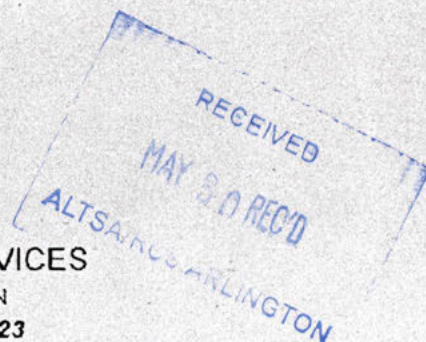
A handwritten signature in cursive script that reads "Kim Ripley".

Kimberley Ripley, Field Manager
Region 2, Unit A
Residential Care Services

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



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3906-172nd St NE, Suite #100, Arlington, WA 98223



Statement of Deficiencies

License #: 2204

Compliance Determination # 23421

Plan of Correction

LIGHTHOUSE MEMORY CARE

Completion Date

Page 1 of 4

Licensee: LIGHTHOUSE MEMORY CARE LLC

05/17/2023

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 the unannounced on-site full inspection on 05/02/2023 and 05/04/2023 of:

LIGHTHOUSE MEMORY CARE
3502 K AVENUE
ANACORTES, WA 98221

The following sample was selected for review during the unannounced on-site visit: 7 of 31 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Yulia Bondarchuk, LTC Surveyor
Judith Mellon, RN, Licenser

From:

DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2, Unit A
3906-172nd St NE, Suite #100
Arlington, WA 98223

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.

Kim Ripley
Residential Care Services

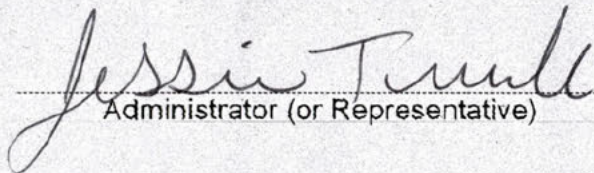
05/18/2023

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.

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Statement of Deficiencies	License # 2204	Compliance Determination # 23421
Plan of Correction	LIGHTHOUSE MEMORY CARE	Completion Date
Page 2 of 4	Licensee: LIGHTHOUSE MEMORY CARE LLC	05/17/2023


 Administrator (or Representative)

05/25/2023
 Date

WAC 388-78A-2480 Tuberculosis Testing Required.

(1) The assisted living facility must develop and implement a system to ensure each staff person is screened for tuberculosis within three days of employment.

This requirement was not met as evidenced by:

Based on interview and record reviews the Assisted Living Facility failed to ensure 2 of 6 sampled Staff (Staff E & F) were screened for Tuberculosis (TB) within 3 days of employment. This failure placed 31 residents at risk for possible exposure to a communicable disease.

Findings included...

During record review of the ALF's staff files the following was noted:

Staff E was hired as a Caregiver on 03/30/2023. Review of Staff E's records showed Staff E had a TB test completed on 04/05/2023. The TB test was given seven days after Staff E's hire date.

Staff F was hired as a Caregiver on 03/05/2020. Review of Staff F's records showed Staff F had a TB test completed on 03/29/2022. The TB test was given 25 days after Staff F's hire date.

In an interview on 05/04/2023 at 10:30 AM, Staff A, Executive Director stated that Staff E and Staff F did not have a TB completed within three days of hire.

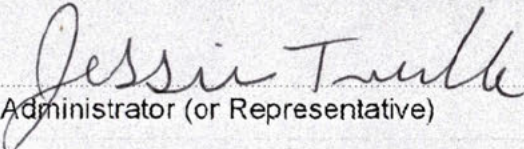
Plan/Attestation Statement

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, LIGHTHOUSE MEMORY CARE is or will be in compliance with this law and / or regulation on (Date) July 05, 2023.

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

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Statement of Deficiencies	License #: 2204	Compliance Determination # 23421
Plan of Correction	LIGHTHOUSE MEMORY CARE	Completion Date
Page 3 of 4	Licensee: LIGHTHOUSE MEMORY CARE LLC	05/17/2023

	05/25/2023
Administrator (or Representative)	Date

WAC 246-215-03306 Preventing food and ingredient contamination Packaged and unpackaged food Separation, packaging, and segregation (FDA Food Code 3-302.11).

(1) A food must be protected from cross contamination by:

(d) Except as specified under WAC 246-215-03520 and subsection (2) of this section, storing the food in packages, covered containers, or wrappings;

WAC 388-78A-2305 Food sanitation. The assisted living facility must:

(1) Manage food, and maintain any on-site food service facilities in compliance with chapter 246-215 WAC, Food service;

This requirement was not met as evidenced by:

Based on observation and interview the Assisted Living Facility (ALF) failed to protect food from cross contamination. This failure placed all residents at risk for food-borne illness.

Findings included...

Observation on 05/02/2023 at 10:18 AM, showed two uncovered trays on a pan rack in the walk-in refrigerator with 8 coconut cream pies, 3 cherry pies, 1 cake, 9 fruit and 1 apple sauce portioned out in food cups.

On 05/02/2023 at 10:18 AM, Staff C, Culinary Service Director, stated that the refrigerator has a Go Green Environmental air purifying system, was told it was okay to leave food uncovered and thought it was ok to leave the food uncovered.

Record review of information on the Go Green air purifying system showed an analysis report dated 12/06/2010 through 12/15/2010, with an address in Texas for a Certificate of Analysis. An experimental summary of the testing showed controls were set up to monitor and limit the rise in bacteria in food. The analysis report showed a final analysis that results will vary depending on conditions present; particular foods, refrigeration temperatures and handling procedures.

During an interview on 05/16/2023 at 12:01 PM, Collateral Contact 1 (CC1) stated that the Go Green air purifying system would not prevent spills or droppings into the uncovered food in the refrigerator.

Observation on 05/04/2023 at 8:30 AM, showed two uncovered trays on a pan rack in the refrigerator with 6 pudding cups on one tray and another tray with 5 salad and 10 desert portioned out in food cups.

Statement of Deficiencies

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Completion Date

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Licensee: LIGHTHOUSE MEMORY CARE LLC

05/17/2023

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, LIGHTHOUSE MEMORY CARE is or will be in compliance with this law and / or regulation on (Date) July 05, 2023

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

Jessi Trunk
Administrator (or Representative)

05/25/2023
Date

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