



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

11/08/2024

Cascade Living Group - Mt Glen, LLC
Mountain Glen Retirement Community
1810 E Division St
Mount Vernon, WA 98274-4633

RE: Mountain Glen Retirement Community # 2328

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 50122 (Completion Date 11/08/2024) and 46917 (Completion Date 09/12/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 11/08/2024 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 388-112A-0400 What is specialty training and who is required to take it?

(2) Specialty training classes are different for each population served and are not interchangeable. Specialty training curriculum must be DSHS developed, as described in WAC 388-112A-0010 (3), or DSHS approved.

WAC 388-112A-0495 What are the specialty training and supervision requirements for long-term care workers in adult family homes, assisted living facilities, and enhanced services facilities? Adult family homes.

(4) If an assisted living facility serves one or more residents with special needs, the assisted living facility must ensure that a long-term care worker employed by the facility demonstrates completion of, or completes and demonstrates competency in specialty training within one hundred twenty days of hire. However, if specialty training is not integrated with basic training, the specialty training must be completed within ninety days of completion of basic training.

WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(c) Specialty for dementia, mental illness and/or developmental disabilities when serving residents with any of those primary special needs;

WAC 388-112A-0600 What is continuing education and what topics may be covered in continuing education?

(1) Continuing education is annual training designed to promote professional development and increase a long-term care worker's knowledge, expertise, and skills. DSHS must approve continuing education curricula and instructors.

WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(e) Continuing education.

The Department staff who did the On Site verification:

Cristina Gonzalez, ALF Licenser

Jodi Condyles, ALF Licenser

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

Sincerely,

Kimberley Ripley, Field Manager

Region 2, Unit A

Residential Care Services



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

09/19/2024

Licensee: Cascade Living Group - Mt Glen, LLC
Mountain Glen Retirement Community
1810 E Division St
Mount Vernon, WA 98274-4633

RE: Mountain Glen Retirement Community License # 2328

Dear Administrator:

The Department completed a full inspection and a complaint investigation of your Assisted Living Facility on 09/12/2024 and found that your facility does not meet the Assisted Living Facility licensing requirements.

The Department:

- Wrote the enclosed Statement of Deficiencies (SOD) report; and
- May take licensing enforcement action based on any deficiency listed on the enclosed report; and
- May inspect the facility to determine if you have corrected all deficiencies.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately;
- Contact the Field Manager for clarifications related to the Statement of Deficiencies (SOD);
- Within 10 calendar days after you receive this letter, complete and return the enclosed 'Plan/Attestation Statement';
 - o Sign and date the enclosed report;
 - o For each deficiency, indicate the date you have or will correct each deficiency;
 - o Next to each deficiency, sign and date certifying that you have or will correct each cited deficiency; and
 - o Mail the Plan/Attestation Statement and report with original signatures to:

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

Cascade Living Group - Mt Glen, LLC
Mountain Glen Retirement Community # 2328
09/12/2024
Page 2 of 8

Kimberley Ripley, Field Manager
Residential Care Services
Region 2, Unit A
3906-172nd St NE, Suite #100
Arlington, WA 98223

- Complete correction(s) within 45 days, or sooner if directed by the Department, after review of your proposed correction dates.
- Have your plan approved by the Department.

You May:

- Receive a letter of enforcement action based on any deficiency listed on the enclosed report.

In Addition, You May:

- Request an **Informal Dispute Resolution (IDR)** review within 10 working days after you receive this letter. Your IDR request **must** include:
 - o What specific deficiency or deficiencies you disagree with;
 - o Why you disagree with each deficiency; and
 - o Whether you want an IDR to occur in-person, by telephone or as a paper review.
 - o Send your request to:

IDR Program Manager
Department of Social and Health Services
Aging and Long-Term Support Administration
Residential Care Services
PO Box 45600
Olympia, WA 98504-5600

If You Have Any Questions:

- Please contact me at (360)651-6846.

Sincerely,



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

Enclosure

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



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

Statement of Deficiencies	License #: 2328	Compliance Determination # 46917
Plan of Correction	Mountain Glen Retirement Community	Completion Date
Page 3 of 8	Licensee: Cascade Living Group - Mt Glen, LLC	09/12/2024

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 the unannounced on-site full inspection and complaint investigation on 09/10/2024, 09/11/2024 and 09/12/2024 of:

Mountain Glen Retirement Community
1810 E Division St
Mount Vernon, WA 98274-4633

This document references the following complaint numbers: 142599.

The following sample was selected for review during the unannounced on-site visit: 7 of 60 current residents and 1 former residents.

The department staff that inspected the Assisted Living Facility:

Jodi Condyles, ALF Licensor
Cristina Gonzalez, ALF Licensor
Judith Mellon, RN, Licensor

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

09/19/2024

Date

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

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 388-112A-0400 What is specialty training and who is required to take it?

(2) Specialty training classes are different for each population served and are not interchangeable. Specialty training curriculum must be DSHS developed, as described in WAC 388-112A-0010 (3), or DSHS approved.

WAC 388-112A-0495 What are the specialty training and supervision requirements for long-term care workers in adult family homes, assisted living facilities, and enhanced services facilities? Adult family homes.

(4) If an assisted living facility serves one or more residents with special needs, the assisted living facility must ensure that a long-term care worker employed by the facility demonstrates completion of, or completes and demonstrates competency in specialty training within one hundred twenty days of hire. However, if specialty training is not integrated with basic training, the specialty training must be completed within ninety days of completion of basic training.

WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(c) Specialty for dementia, mental illness and/or developmental disabilities when serving residents with any of those primary special needs;

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 4 of 6 staff (Staff A, B, C, and D) completed specialty developmental disabilities training, 3 of 6 staff (Staff B, C, and D) completed specialty dementia training that was approved by the Department of Social and Health Services (DSHS), and 1 of 6 staff (Staff C) completed specialty mental health training. This failure resulted in Staff A, B, C, and D not having the training on how to effectively and safely provide care to residents living with [REDACTED], [REDACTED], and [REDACTED] and placed all residents with these diagnoses at risk for compromised care and safety.

Findings included...

Developmental Disabilities (DD) Specialty Training

Review of the ALF's Resident Characteristic Roster, dated 09/10/2024, showed one resident (Resident 8) lived in the ALF and had a [REDACTED] diagnosis.

Resident 8 was admitted to the ALF on [REDACTED]/2001 with multiple medical diagnoses including [REDACTED]

Review of the ALF's employee files showed the following:

Staff A, Executive Director, was hired on 12/07/2021. There was no documentation that Staff A had completed DD specialty training.

Staff B, Caregiver, was hired on 05/26/2023. There was no documentation that Staff B had completed DD specialty training.

Staff C, Caregiver, was hired on 02/28/2024. There was no documentation that Staff C had completed DD specialty training.

Staff D, Caregiver, was hired on 04/06/2023. There was no documentation that Staff D had completed DD specialty training.

On 09/11/2024 at 2:08 PM, Staff H, Business Office Manager, stated that Staff A, B, C, and D had not completed specialty training on developmental disabilities.

On 09/12/2024 at 3:42 PM, Staff C stated that they had not taken specialty training on developmental disabilities.

Dementia Specialty Training

Review of the ALF's Resident Characteristic Roster, dated 09/10/2024, showed 23 residents who lived in the ALF had a diagnosis of [REDACTED].

Review of the ALF's employee files showed the following:

Staff B, Caregiver, was hired on 05/26/2023. There was no documentation that Staff B had completed a DSHS-approved specialty training program on dementia.

Staff C, Caregiver, was hired on 02/28/2024. There was no documentation that Staff C had completed dementia specialty training.

Staff D, Caregiver, was hired on 04/06/2023. There was no documentation that Staff D had completed a DSHS-approved specialty training program on dementia.

On 09/11/2024 at 2:08 PM, Staff H stated that Staff C had not yet completed their specialty training on dementia.

On 09/12/2024 at 3:42 PM, Staff C stated that they were still in the process of finishing their dementia specialty training through an online program.

On 09/12/2024 at 3:04 PM, Staff H stated that they weren't aware that the dementia training they were currently assigning to their staff to fulfill specialty training requirements were required to be approved by DSHS. Staff H stated that Staff B and D did not have DSHS-approved dementia specialty training.

Mental Health (MH) Specialty Training

Resident 3 was admitted to the ALF on [REDACTED]/2024 with multiple medical diagnoses including

[REDACTED].

Resident 5 was admitted to the ALF on [REDACTED]/2023 with multiple medical diagnoses including

[REDACTED].

Resident 7 was admitted to the ALF on [REDACTED]/2024 with multiple medical diagnoses including

[REDACTED].

Review of the ALF's employee files showed Staff C, Caregiver, was hired on 02/28/2024. There was no documentation that Staff C had completed MH specialty training.

On 09/12/2024 at 3:42 PM, Staff C stated that they were still in the process of finishing their mental health specialty training through an online program.

Plan/Attestation Statement

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

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, Mountain Glen Retirement 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

WAC 388-112A-0600 What is continuing education and what topics may be covered in continuing education?

(1) Continuing education is annual training designed to promote professional development and increase a long-term care worker's knowledge, expertise, and skills. DSHS must approve continuing education curricula and instructors.

WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(e) Continuing education.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 6 staff (Staff F) completed 12-hours of Department of Social and Health Services (DSHS) approved continuing education (CE) per year. This failure resulted in Staff F not having annual training to maintain their knowledge, expertise, and skills up-to-date and placed all 60 residents at risk for compromised care and safety.

Findings included...

Review of the ALF's employee files showed the following:

Staff F, Medication Technician, was hired on 10/03/2016. Staff F's CEs did not have a provider code, or the CE approval code required for DSHS approved CE's.

On 9/12/2024 at 3:14PM, Staff H, Business Office Manager, stated that they use a continuing education on-line program provided by the ALF's corporate office. Staff H stated that they thought all CEs through this program were DSHS approved and had not

checked for DSHS approval when reviewing the specific topics of the on-line program.

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, Mountain Glen Retirement 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