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

10/22/2024

CRP/CSH Mercer Island LLC
ISLAND HOUSE
7810 SE 30th St
Mercer Island, WA 98040

RE: ISLAND HOUSE # 2375

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 48919 (Completion Date 10/22/2024) and 45173 (Completion Date 09/05/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 10/22/2024 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
**WAC 388-78A-2660 Resident rights. The assisted living facility must:**

(1) Comply with chapter 70.129 RCW, Long-term care resident rights;

The Department staff who did the On Site verification:
Lisa Hauk, Complaint Investigator

If you have any questions, please contact me at (253)312-1446.

Sincerely,

Jamie Singer

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

## Residential Care Services
### Investigation Summary Report

**Provider/Facility:** ISLAND HOUSE
**Provider Type:** Assisted Living Facility
**License/Cert.#:** 2375
**Compliance Determination #:** 45173
**Intake ID:** 139929
**Investigator:** Lisa Hauk
**Region/Unit #:** RCS Region 2 / Unit J
**Investigation Date(s):** 08/05/2024 through 09/05/2024
**Complainant Contact Date(s):**

**Allegation(s):**

1. The Named Resident's (NR) family did not respond to the Assisted Living Facility (ALF) when the ALF terminated the NR's lease.
2. The ALF hired an agency to provide one to one care for the NR at the resident's expense and the NR's family requested the one to one service be discontinued.

**Investigation Methods:**

**Sample:**
Total residents: 49
Resident sample size: 2
Closed records sample size: 0

**Observations:**
Residents
Activities
Resident rooms
Staff to resident interactions
Resident to resident interactions

**Interviews:**
Administration
Nursing staff
Residents
Family members

**Record Reviews:**
Medical records
Incident investigation
Facility policies

**Investigation Summary:**

1. Interview and record review showed the ALF notified the NR's family in an email that the ALF terminated the NR's lease and the NR had 30 days to move out. The ALF did not give a discharge letter to the NR or the NR's family. Violation of regulations identified. See citation WAC 388-78A-2660.
2. Interview and record review showed the NR could not afford the one to one care. The NR's family asked the ALF to discontinue the one to one care and the ALF refused. The NR's family members took the NR to their home until an alternate living situation could be arrange. No violation of regulation 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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| | | |
|---|---|---|
| Statement of Deficiencies | License #: 2375 | Compliance Determination # 45173 |
| Plan of Correction | ISLAND HOUSE | Completion Date |
| Page 1 of 3 | Licensee: CRP/CSH Mercer Island LLC | 09/05/2024 |

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 08/05/2024 and 08/05/2024 of:

ISLAND HOUSE
7810 SE 30th St
Mercer Island, WA 98040

This document references the following complaint number(s): 139929

The following sample was selected for review during the unannounced on-site visit: 2 of 49 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.

Jennie Siegner
Residential Care Services

9/9/2024
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.

Administrator (or Representative) Date 4/9/24

**WAC 388-78A-2660 Resident rights. The assisted living facility must:**

(1) Comply with chapter 70.129 RCW, Long-term care resident rights;

**This requirement was not met as evidenced by:**

Based on interview and record review, the Assisted Living Facility (ALF) failed to provide a discharge letter that included all required information for 1 of 2 residents (Resident 1) who were discharged. This failure prevented Resident 1 and her representatives from understanding their rights related to discharge from the facility.

Findings included...

NOTE: Revised Code of Washington (RCW) RCW 70.129.110 - Disclosure, transfer, and discharge requirements. (3) Before a long-term care facility transfers or discharges a resident, the facility must: (b) Notify the resident and resident representative of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand; (c) Record the reasons in the resident's record; and (d) Include in the notice the items described in subsection (5) of this section. (4)(a) Except when specified in this subsection, the notice of transfer or discharge required under subsection (3) of this section must be made by the facility at least thirty days before the resident is transferred or discharged (5) The written notice specified in subsection (3) of this section must include the following: (a) The reason for transfer or discharge; (b) The effective date of transfer or discharge; (c) The location to which the resident is transferred or discharged; (d) The name, address, and telephone number of the state long-term care ombuds.

Record review of a Face Sheet showed the ALF admitted Resident 1 on [redacted]/2023. Review of an Assessment, dated 05/22/2024, showed Resident 1 had diagnoses of [redacted] with a history of wandering and exit seeking behavior.

Record review of Progress Notes showed Resident 1 had eloped from the ALF on four occasions from 04/23/2024 to 7/17/2024. On three of these occasions Resident 1 was returned to the facility by law enforcement. Records showed the facility attempted safety interventions to include wander guard (a technology platform that helps keep at-risk residents safe by monitoring them and sending safety alerts), and one on one care. Records showed the ALF had a care conference on 06/25/2024, with Resident 1's representatives to discuss elopement issues.

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In interview on 08/07/2024, Staff A (Executive Director) stated that there was no formal discharge letter given to Resident 1 or her family other than an email dated 06/25/2024, that showed the ALF informed the family that they would put a 30-day discharge notice in their system.

Record review of an email from Collateral Contact 1 (CC1- Resident 1's Representative), dated 08/07/2024, showed the ALF told family members in person and by email that Resident 1 had to move out of the ALF, but Resident 1 and her family did not receive a discharge notice. The email did not include a specific reason for transfer and discharge, the effective date of transfer or discharge, the location to which the resident would be transferred or discharged to, or the name, address and telephone number of the Long Term Care Ombuds.

**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, ISLAND HOUSE is or will be in compliance with this law and / or regulation on (Date) 9/9/24.

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

Wilder Cl — 9/9/24

~~Administrator (or Representative)~~ ~~Date~~