



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

05/21/2024

2016 S & S
Welcome Home (Oak Harbor Senior Memory Care)
235 SW 6TH AVE
OAK HARBOR, WA 98277

RE: Welcome Home (Oak Harbor Senior Memory Care) License # 2424

Dear Administrator:

This letter addresses Compliance Determination(s) 41427 (Completion Date 05/16/2024) and 38341 (Completion Date 03/22/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 05/16/2024 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-2610-2-f

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,

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

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



Residential Care Services Investigation Summary Report

Provider/Facility: Welcome Home (Oak Harbor Senior Memory Care)

License/Cert.#: 2424

Compliance Determination #: 38341

Investigator: Syng To

Investigation Date(s): 03/14/2024 through 03/22/2024

Complainant Contact Date(s): 03/06/2024

Provider Type: Assisted Living Facility

Intake ID: 121218

Region/Unit #: RCS Region 2 / Unit A

Allegation(s):

The Assisted Living Facility (ALF) did not provide notification of COVID.

Investigation Methods:

Sample:	Total residents: 28 Resident sample size: 6 Closed records sample size: 1
Observations:	Infection Control
Interviews:	Staff Local Health Jurisdiction
Record Reviews:	Facility records Residents records

Investigation Summary:

Based on interviews and record reviews:

The ALF failed to initiate, conduct, follow all applicable infection prevention, control guidelines, and policies during the outbreak. Interviewed staff stated the communicable disease was not reported to the Local Health Jurisdiction (LHJ). Record reviews showed primary care provider (PCP) and family representatives to all residents who tested positive were notified regarding the outbreak. A citation was issued for WAC 388-78A-2610 (2)(f) Infection Control.

Conclusion / Action:

- ☒ 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 #: 2424	Compliance Determination # 38341
Plan of Correction	Welcome Home (Oak Harbor Senior Memory Care)	Completion Date
Page 1 of 3	Licensee: 2016 S & S	03/22/2024

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 03/14/2024, 03/14/2024 and 03/14/2024 of:

Welcome Home (Oak Harbor Senior Memory Care)
235 SW 6TH AVE
OAK HARBOR, WA 98277

This document references the following complaint number(s): 121218

The following sample was selected for review during the unannounced on-site visit: 6 of 28 current residents and 1 former residents.

The department staff that investigated the Assisted Living Facility:

Syng To, ALF Complaint Investigator

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

03/28/2024

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.

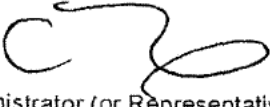
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State of Washington

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Statement of Deficiencies	License #: 2424	Compliance Determination # 38341
Plan of Correction	Welcome Home (Oak Harbor Senior Memory Care)	Completion Date
Page 2 of 3	Licensee: 2016 S & S	03/22/2024


Administrator (or Representative)

04/02/2024
Date

WAC 388-78A-2610 Infection control.

(2) The assisted living facility must:

(f) Report communicable diseases in accordance with the requirements in chapter 246-100 WAC.

This requirement was not met as evidenced by:

Based on interviews and record reviews, the Assisted Living Facility (ALF) failed to report their coronavirus (COVID-19) (an infectious disease caused by the SARS-CoV-2 virus) outbreak to the Local Health Jurisdiction (LHJ). This failure resulted in the ALF not receiving current outbreak guidance from the LHJ and the LHJ not having updated COVID-19 community outbreak numbers.

Findings included...

Review of WAC 246-101-101 Notifiable conditions-Health care providers and health care facilities showed COVID-19 was to be reported to the LHJ immediately.

Review of the ALF's Infection Prevention and Control Program dated November 2022, page 25, showed the ALF procedure when a resident is reasonably suspected of having a reportable communicable disease, the administrator may report the information to the local health director of the county in which the facility is located, depending on the specific reportable condition, time frames for reporting vary and include (i) immediately by telephone, (ii) within 24 hours by telephone and (iii) within 3 business days.

During an interview on 03/14/2024 at 10:39AM, Staff A, Executive Director, stated that the LHJ was not notified for the COVID-19 outbreak that occurred at the ALF on 02/13/2024. As of 03/14/2024 the LHJ had still not been notified.

On 03/14/2024 at 10:39AM, Staff B, Wellness Director, stated that they had 19 residents test positive for COVID-19 between 02/13/2024 and 03/14/2024. Staff B confirmed that the LHJ was never notified about the COVID-19 outbreak.

On 03/20/2024 at 9:57 AM, Collateral contact (CC), Local Health Jurisdiction, stated that they did not receive any information from the ALF about the COVID-19 outbreak.

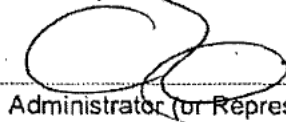
Plan/Attestation Statement

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

Statement of Deficiencies	License #: 2424	Compliance Determination # 38341
Plan of Correction	Welcome Home (Oak Harbor Senior Memory Care)	Completion Date
Page 3 of 3	Licensee: 2016 S & S	03/22/2024

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, Welcome Home (Oak Harbor Senior Memory Care) is or will be in compliance with this law and / or regulation on (Date) 04/01/2024.

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



Administrator (or Representative)

04/01/2024
Date

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