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

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) 63646 (Completion Date 08/01/2025) and 57193 (Completion Date 06/11/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 08/01/2025 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-2090

The Department staff who did the on-site verification:
Melissa Phillips, Long Term Care Surveyor

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: Welcome Home (Oak Harbor Senior Memory Care)
License/Cert.#: 2424
Compliance Determination #: 57193
Investigator: Melissa Phillips
Investigation Date(s): 03/31/2025 through 06/11/2025
Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 172181
Region/Unit #: RCS Region 2 / Unit A

Allegation(s):

1. The Identified Resident (IR) was offering other residents hallucinogenic mushrooms.
2. The IR was asking another resident to make a meth pipe.
3. The IR had a hatchet and large knife in their room.

Investigation Methods:

Sample:	Total residents: 36 Resident sample size: 1 Closed records sample size: 1
Observations:	General tour Staff to resident interactions Hatchet and knife found in IR's room
Interviews:	Resident Collateral Contacts Facility staff Executive Director
Record Reviews:	Face sheet Assessments Service plans Progress notes Investigations Move in/move out record Disclosure of services

Investigation Summary:

1. Interview and record review showed the facility investigated the concerns and followed their process to ensure resident safety. The IR denied the allegations and there was no evidence found to show that the IR had hallucinogenic mushrooms in their possession. No failed practice was identified.
2. Interview and record review showed the facility continued to investigate increasing concerns about the IR's behavior. Review of the resident records showed no 14 day assessment was completed on IR or sample residents that admitted to

the facility during the same period as the IR. A citation was issued for non compliance with Washington Administrative Code 388-78A-2090 Full assessment topics.
3. Observation, interview, and record review showed the IR had a hatchet and knife in the facility. Due to the concern about the resident keeping potential weapons in the facility and the increased behavioral concerns of the IR, the facility chose to request that the IR discharge from the facility. No failed practice was identified.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Statement of Deficiencies	License #: 2424	Compliance Determination # 57193
Plan of Correction	Welcome Home (Oak Harbor Senior Memory Care)	Completion Date
Page 1 of 4	Licensee: 2016 S & S	06/11/2025

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 03/31/2025 of:

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

This document references the following complaint number(s): 172181, 172767, 173569

The following sample was selected for review during the unannounced on-site visit: 1 of 36 current residents and 1 former residents.

The department staff that investigated the Assisted Living Facility:

Melissa Phillips, Long Term Care Surveyor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit Z
20425 72nd Avenue S, Suite 400
Kent, WA 98032

Statement of Deficiencies	License #: 2424	Compliance Determination # 57193
Plan of Correction	Welcome Home (Oak Harbor Senior Memory Care)	Completion Date
Page 2 of 4	Licensee: 2016 S & S	06/11/2025

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.

Anthony Devito
Residential Care Services

06/16/2025
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)

6-17-2025
Date

WAC 388-78A-2090 Full assessment topics. The assisted living facility must obtain sufficient information to be able to assess the capabilities, needs, and preferences for each resident, and must complete a full assessment addressing the following, within fourteen days of the resident's move-in date, unless extended by the department for good cause:

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to complete a full assessment for 3 of 3 newly admitted residents (Resident 1, 2, and 3) within 14 days of admission. This failure resulted in Residents 1, 2, and 3 not having an assessment to determine their capabilities, needs and preferences and placed Resident 1, 2, and 3's needs at risk of being unmet.

Findings included...

Resident 1

Review of Resident 1's records showed that Resident 1 was admitted to the ALF on [redacted]/2025 with diagnoses including [redacted]) and [redacted]).

Review of Resident 1's records showed a pre-admission assessment dated 02/05/2025. No 14-day assessment was available for review.

On 05/16/2025 at 4:29 PM, Staff A, Executive Director, stated that they had talked to the nurse the ALF contracts with to do their assessments and there was no completed 14-day assessment for Resident 1.

Resident 2

Review of an undated face sheet showed that Resident 2 was admitted to the ALF on [redacted]/2025 with diagnoses including [redacted] ([redacted]).

Review of Resident 2's records showed a pre-admission assessment dated 03/11/2025. No 14-day assessment was available for review.

On 06/05/2025 at 3:45 PM, Staff A stated that they had completed an audit of resident records and recognized that assessments had not been being completed as required. Staff A verified that there was no completed 14-day assessment for Resident 2.

Resident 3

Review of an undated face sheet showed that Resident 3 was admitted to the ALF on [redacted]/2025 with diagnoses including [redacted] ([redacted]).

Review of Resident 3's records showed a pre-admission assessment dated 02/18/2025. No 14-day assessment was available for review.

On 06/05/2025 at 3:45 PM, Staff A stated that they had completed an audit of resident records and recognized that assessments had not been being completed as required. Staff A verified that there was no completed 14-day assessment for Resident 3. Staff A verified that there was no completed 14-day assessment for Resident 3.

Statement of Deficiencies	License #: 2424	Compliance Determination # 57193
Plan of Correction	Welcome Home (Oak Harbor Senior Memory Care)	Completion Date
Page 4 of 4	Licensee: 2016 S & S	06/11/2025

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, Welcome Home (Oak Harbor Senior Memory Care) is or will be in compliance with this law and / or regulation on (Date) 7-31-25 .

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

Administrator (or Representative) 6-17-2025 Date