STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

RP Operations, LLC
Rose Pointe Assisted Living
13013 E Mission Ave
Spokane Valley, WA 99216

RE: Rose Pointe Assisted Living # 2452

Dear Administrator:

This document references Compliance Determination 39787 (04/30/2024), which included complaint number(s) 125727, 126448, 127568.
The Department completed a complaint investigation of your Assisted Living Facility on 04/30/2024 and found that your facility does not meet the Assisted Living Facility requirements.

The department staff who did the inspection and provided consultation:

Raul Gatchalian, Community Complaint Investigator

Consultation:

WAC 388-78A-2300 Food and nutrition services.

(1) The assisted living facility must:

(c) Ensure all menus:

(i) Are written at least one week in advance and delivered to residents' rooms or posted where residents can see them, except as specified in (f) of this subsection;

(f) Substitute foods of equal nutrient value, when changes in the current day's menu are necessary, and record changes on the original menu;

The facility failed to provide one week in advance food menu to the residents. The facility

substituted food and did not document it to the original menu. The facility stated moving forward, they will provide residents with menu by posting it weekly on the billboard and documenting any changes to the original menu.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:

- Inspect the facility to determine if you have corrected all deficiencies.

You May:

- Contact me for clarification of the deficiency or deficiencies found.

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 (509)993-7821.

Sincerely,

Stephanie Jenks, Field Manager
Region 1, Unit B
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: Rose Pointe Assisted Living **Provider Type:** Assisted Living Facility

License/Cert.#: 2452
Intake ID: 125727
Compliance Determination #: 39787
Region/Unit #: RCS Region 1 / Unit B
Investigator: Raul Gatchalian
Investigation Date(s): 04/16/2024 through 04/30/2024
Complainant Contact Date(s): 04/10/2024, 04/19/2024

Allegation(s):
Resident being served with same meals two times in a week.

Investigation Methods:

Sample:	Total residents: 90 Resident sample size: 8 Closed records sample size: 1
Observations:	Residents Dining Staff to resident interactions Kitchen Food preparation
Interviews:	Identified staff Nursing staff Residents Kitchen staff Executive Director
Record Reviews:	Medical records State reporting log Facility policies Personnel files Staff training records Staff patterns Menu and alternative menu

Investigation Summary:
The facility failed to provide the facility menu to residents one week in advance. The facility substituted food and did not document the changes on the original menu.
Failed practice consultation under WAC 388-78A-2300 (1) (c) (i) and WAC 388-78A-2300 (1) (f).

Conclusion / Action:

☒ Failed Provider Practice Identified / Citation(s) Written

☐ Failed Provider Practice Not Identified / No Citation Written

☐ N/A