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

Emeritol Hearthstone Inn LLC
Brookdale Hearthstone Moses Lake
905 S Pioneer Way
Moses Lake, WA 98837

RE: Brookdale Hearthstone Moses Lake License # 2524

Dear Administrator:

This letter addresses Compliance Determination(s) 66208 (Completion Date 09/25/2025) and 63866 (Completion Date 08/08/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/25/2025 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-2484-1, WAC 388-78A-2484-2, WAC 388-78A-2484, WAC 388-78A-2474-2-a, WAC 388-78A-2474-2-c, WAC 388-78A-2474-2-b

The Department staff who did the on-site verification:
Jennifer Lee, Assisted Living Facility Licensor

If you have any questions, please contact me at (509)993-7821.

Sincerely,

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

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

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 on 08/05/2025, 08/06/2025 and 08/08/2025 of:

Brookdale Hearthstone Moses Lake
905 S Pioneer Way
Moses Lake, WA 98837

The following sample was selected for review during the unannounced on-site visit: 7 of 45 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Jennifer Lee, Assisted Living Facility Licensor
Veronica Jackson, Assisted Living Facility Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit B
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

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.

J Salquist
Residential Care Services

08/13/2025
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.

Laurie Ahmann
Administrator (or Representative)

8/18/2025
Date

WAC 388-78A-2484 Tuberculosis Two step skin testing. Unless the staff person meets the requirement for having no skin testing or only one test, the assisted living facility choosing to do skin testing, must ensure that each staff person has the following two-step skin testing:

(1) An initial skin test within three days of employment; and

(2) A second test done one to three weeks after the first test.

This requirement was not met as evidenced by:

Based on record review and interview, the facility failed to ensure that testing for tuberculosis had been completed within three days of hire for 2 of 5 staff (Staff B and C). This failure placed residents at risk of spreading a contagious disease.

Findings included...

<Staff B>

Review of Staff B's, Care Partner, personnel file showed a hire date of 12/21/2023, and they were tested for tuberculosis (TB, a contagious respiratory illness) on 12/28/2023.

<Staff C>

Review of Staff C's, Care Partner, personnel file showed a hire date of 06/11/2024, and they received their first test for TB on 10/22/2024, 133 days after the date of hire. Further review showed that they received their second test for TB on 11/25/2024, 34 days after the first test had been completed.

In an interview on 08/05/2025 at 3:05 PM, Staff D, Business Office Coordinator, stated they did not know why Staff B and Staff C did not complete TB testing in the required time frames because they were not the acting business office coordinator at that time. Staff D confirmed that Staff B and Staff C had been working as caregivers after their second day of being hired, which was 12/23/2023 for Staff B and 06/13/2024 for Staff C.

This is a deficiency previously cited on 10/10/2022.

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, Brookdale Hearthstone Moses Lake is or will be in compliance with this law and / or regulation on (Date) 9/19/2025 .

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

Laurie Ahmann
Administrator (or Representative)

8/13/2025
Date

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:

(a) Orientation and safety;

(b) Basic;

(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 record review and interview, the facility failed to ensure that training requirements were met for dementia and mental health specialty training, basic training for home care aide certification, facility orientation, and orientation and safety for 1 of 5 staff (Staff B). This failure placed the residents at risk of receiving care from untrained staff.

Findings included...

< Specialty Training>

Review of WAC 388-112A-0400 showed that specialty training was required for all long-term care workers to complete within 120 days of their hire date. Further review showed that required content for specialty training for dementia was listed in WAC 388-112A-0440. Further review showed that required content for specialty training for mental health was listed in WAC 388-112A-0450.

Review of the facility's undated Disclosure of Services showed that they provided services to residents with diagnoses of [redacted] and [redacted].

Review of the facility's Characteristic Roster, provided to the department on 08/05/2025, showed 11 residents listed with dementia, Alzheimer's (brain disorder affecting memory, thinking, and ability to carry out daily tasks), or mental health disorders.

Review of Staff B's, Care Partner, personnel file showed they were hired on 12/21/2023. Further review showed that the dementia specialty training was completed on 04/25/2024, which was 127 days after their hire date. Further review showed that the mental health specialty training was completed on 04/23/2025, which was 125 days after the hire date.

In an interview on 08/07/2025 at 2:48 PM, Staff A, Executive Director, stated that Staff B had been working and providing resident care after their second day of being hired which was on 12/23/2025. Staff A further stated they did not know why Staff B's specialty training was not completed prior to their 120th day that they worked with residents at the facility.

<Basic training, Home Care Aide and Orientation and Safety, and facility training>

Review of WAC 388-112A-0080 showed that long term care workers must complete 70 hours of basic training within 120 days of the date of hire.

Review of WAC 388-112A-0220 showed that safety training must be completed before providing care to any resident.

Review of Staff B's personnel file showed a hire date of 12/21/2023. Further review showed that the 70 hours of basic training to obtain home care aide certification had been completed on 11/06/2024, which was 322 days after being hired. Further review showed that Staff B completed their orientation and safety training on 04/25/2024,

which was 127 days after their hire date. Further review showed Staff B completed their facility orientation on 04/25/2024, which was 127 days after being hired.

Review of Staff B's May through August 2025 schedule, showed Staff B worked 63 days during that timeframe.

In an interview on 08/07/2025 at 3:33 PM, Staff A, stated that Staff B had not completed their basic training before the 120 days after being hired. Staff A further stated Staff B had not completed their facility orientation or their orientation and safety training before caring for residents. Staff A confirmed that Staff B had been working as a caregiver after their second day of being hired, which was 12/23/2025.

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, Brookdale Hearthstone Moses Lake is or will be in compliance with this law and / or regulation on (Date) 9/19/2025 .

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

Jamie Ahmann
Administrator (or Representative)

8/13/2025
Date