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

Emeritol Fairhaven Estates LLC
Brookdale Fairhaven
2600 Old Fairhaven Parkway
Bellingham, WA 98225

RE: Brookdale Fairhaven License # 2525

Dear Administrator:

This letter addresses Compliance Determination(s) 50713 (Completion Date 11/22/2024) and 47592 (Completion Date 09/24/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 11/22/2024 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-2040-2

The Department staff who did the off-site verification:
Allison Nunn, Long Term Care Surveyor

If you have any questions, please contact me at (360)651-6846.

Sincerely,

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

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

3906-172nd St NE, Suite #100, Arlington, WA 98223

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 off-site follow-up on 09/23/2024 and 09/23/2024 of:

Brookdale Fairhaven
2600 Old Fairhaven Parkway
Bellingham, WA 98225

This document references the following SOD dated: 09/24/2024

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

The department staff that inspected the Assisted Living Facility:

Allison Nunn, Long Term Care Surveyor

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 off-site verification(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

10/03/2024 — 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

WAC 388-78A-2040 Other requirements.

(2) The assisted living facility must have its building approved by the Washington state fire marshal in order to be licensed.

This requirement was not met as evidenced by:

Based on interviews and record review, the Assisted Living Facility (ALF) failed to ensure the violations for 3 of 3 Fire and Life Safety annual inspections (03/21/2024, 4/24/2024 and 5/29/2024) were corrected. This failure placed all residents at risk of harm in the event of a fire.

Findings included...

Review of the Department of Social and Health Services' (DSHS) Secure Tracking and Reporting System (STARS) showed that on 08/06/2024, the ALF received a citation for this regulation. The ALF signed an attestation statement that showed the ALF would have a system in place and the deficiency corrected by 09/20/2024.

Review of the Washington State Patrol Fire Protection Bureau report dated 03/21/2024, showed the ALF had failed to comply with five International Fire Codes (IFC). During the Deputy State Fire Marshal's third visit on 05/29/2024, the following two items had not been corrected:

IFC 903.5 2021 Sprinkler system shall be tested and maintained in accordance with Section 901. The facility's 10 year and 20-year sprinkler head testing had not been completed.

IFC 907.8.3.2021 Smoke detector sensitivity shall be checked within one year of calibration and every alternate year thereafter. The facility completed the Sensitivity test on 04/09/2024 with failed smoke detectors not replaced.

In an interview on 09/23/2024 at 10:53 AM, Staff A, Executive Director, stated that the failed smoke detectors had been replaced and the sprinkler heads had been tested. The results of the sprinkler head test showed the ALF needed to replace six sprinkler heads. Staff A stated that they are waiting for the replacement sprinkler heads and there is no date scheduled for the sprinkler heads to be replaced.

On 09/23/2024 at 7:02 AM, Collateral Contact (CC), Deputy State Fire Marshal, stated that the ALF is not back in compliance.

This is an uncorrected deficiency previously cited on 08/06/2024.

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 Fairhaven is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____

Administrator (or Representative) Date

Residential Care Services
Investigation Summary Report

Provider/Facility: Brookdale Fairhaven
Provider Type: Assisted Living Facility
License/Cert.#: 2525
Compliance Determination #: 43769
Intake ID: 136026
Investigator: Jodi Condyles
Region/Unit #: RCS Region 2 / Unit A
Investigation Date(s): 07/08/2024 through 08/06/2024
Complainant Contact Date(s):

Allegation(s):
The Assisted Living Facility (ALF) failed their 3rd Fire and Life Safety Inspection.

Investigation Methods:

Sample:	Total residents: 44 Resident sample size: 0 Closed records sample size: 0
Observations:	General Tour
Interviews:	Executive Director Deputy Fire Marshall
Record Reviews:	Fire Inspection

Investigation Summary:
Based on interviews and record reviews, the ALF failed to ensure the violations for 3 Fire and Life Safety annual inspections were corrected. A citation was written for noncompliance with WAC 388-78A-2040 (2), Other requirements.

Conclusion / Action:

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

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DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

3906-172nd St NE, Suite #100, Arlington, WA 98223

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 07/08/2024, 07/08/2024 and 07/08/2024 of:

Brookdale Fairhaven
2600 Old Fairhaven Parkway
Bellingham, WA 98225

This document references the following complaint number(s): 136026

The following sample was selected for review during the unannounced on-site visit: 0 of 44 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Jodi Condyles, ALF Licensor

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

08/14/2024

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

WAC 388-78A-2040 Other requirements.

(2) The assisted living facility must have its building approved by the Washington state fire marshal in order to be licensed.

This requirement was not met as evidenced by:

Based on interviews and record review, the Assisted Living Facility (ALF) failed to ensure the violations for 3 of 3 Fire and Life Safety annual inspections (03/21/2024, 4/24/2024 and 5/29/2024) were corrected. This failure placed all residents at risk of harm in the event of a fire.

Findings included...

Review of the Washington State Patrol Fire Protection Bureau report dated 05/29/2024, showed the ALF had failed to comply with the International Fire Codes (IFC) for two items.

During the Deputy State Fire Marshal's third visit on 05/29/2024, the following items had not been corrected:

IFC 903.5 2021 Sprinkler system shall be tested and maintained in accordance with Section 901. The facility's 10 year and 20-year sprinkler head testing had not been completed.

IFC 907.8.3.2021 Smoke detector sensitivity shall be checked within one year of calibration and every alternate year thereafter. The facility completed the Sensitivity test on 04/09/2024 with failed smoke detectors not replaced.

During an interview on 07/08/2024 at 10:21AM, Staff A, Executive Director, stated that they're working with their vendor to replace the faulty sprinkler heads as they're an older model which takes time to find the replacements.

On 07/08/2024 at 9:22AM Collateral contact (CC), Deputy State Fire Marshal, stated that the ALF is not back in compliance.

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 Fairhaven is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____

Administrator (or Representative) Date