STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Avenue, Suite#220, Vancouver, WA 98684

Caring Places Management, LLC
Artesian Place
828 McPhee Rd SW
Olympia, WA 98502

RE: Artesian Place # 2542

Dear Administrator:

This document references Compliance Determination 8641 (05/13/2022), which included complaint number(s) 27665, 31131.
The Department completed a complaint investigation of your Assisted Living Facility on 05/13/2022 and found that your facility does not meet the Assisted Living Facility requirements.

The department staff who did the inspection and provided consultation:

Paul Aube, ALF NCI

Consultation:

WAC 388-110-100 Discharge, social leave, and bed hold. The contractor is not required to discharge (move out) and readmit a resident for absences of less then twenty-one consecutive days. The contractor must:

(1) Note an absence in a resident's record when a resident is absent from the assisted living facility for more than seventy-two consecutive hours;

(3) Notify the department within one working day whenever the resident:

(b) Is discharged to another assisted living facility, nursing home or other health care facility;

(4) Include the department's case manager in the development of a discharge (move out) plan, and have the case manager approve the plan before any required notice of discharge is issued to the resident, except in an emergency;

Quality of Care/Treatment: Upon record review and interviews, the facility failed to notify the DSHS Social Worker of a Resident who discharged from the facility within the appropriate time-frame.
Admission, Transfer, & Discharge Rights: Upon record review and interviews, the facility failed to notify the DSHS Social Worker of a Resident on Social Leave within the appropriate time-frame.

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 (360)397-9556.

Sincerely,

Jody Just

Jody Just, Field Manager

Region 3, Unit E
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: Artesian Place
Provider Type: Assisted Living Facility
License/Cert.#: 2542
Compliance Determination #: 8641
Intake ID: 27665
Investigator: Paul Aube
Region/Unit #: RCS Region 3 / Unit E
Investigation Date(s): 05/13/2022 through 05/13/2022
Complainant Contact Date(s):

Allegation(s):
Quality of Care/Treatment: Facility was not aware that resident was discharged.
Admission, Transfer, & Discharge Rights: Facility did not notify Social Worker of a Resident on Social Leave.

Investigation Methods:

Sample:
Total residents: 46
Resident sample size: 4
Closed records sample size: 1

Observations:
Residents
Resident rooms
Staff to resident interactions

Interviews:
Family members
Nursing staff
Management
RCS Social Worker

Record Reviews:
Admission/Discharge Records
RCS Notice of Change Forms
Email Notifications
Disclosure of Services
Admission Agreements
Negotiated Service Agreements
Medication Administration Records
Treatment Administration Records
Progress Notes

Investigation Summary:
Quality of Care/Treatment: Upon record review and interviews, the facility failed to notify the DSHS Social Worker of a Resident who discharged from the facility within the appropriate time-frame.
Admission, Transfer, & Discharge Rights: Upon record review and interviews, the facility failed to notify the DSHS Social Worker of a Resident on Social Leave within the appropriate time-frame.

Conclusion / Action:

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