



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

Sycamore Glen At Quail Hollow LLC
Sycamore Glen at Quail Hollow
506 N Ehorn Lane
Chewelah, WA 99109

RE: Sycamore Glen at Quail Hollow License # 2556

Dear Administrator:

This letter addresses Compliance Determination(s) 28023 (Completion Date 08/14/2023) and 26503 (Completion Date 07/13/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 08/14/2023 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-2100-1

The Department staff who did the on-site verification:
Carla Rose, NCI Community Licensors

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

Sincerely,

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

This document was prepared by Residential Care Services for the Locator website.



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 8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

Statement of Deficiencies	License #: 2556	Compliance Determination # 26503
Plan of Correction	Sycamore Glen at Quail Hollow	Completion Date
Page 1 of 3	Licensee: Sycamore Glen At Quail Hollow LLC	07/13/2023

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 07/11/2023 and 07/12/2023 of:

Sycamore Glen at Quail Hollow
 506 N Ehorn Lane
 Chewelah, WA 99109

The following sample was selected for review during the unannounced on-site visit: 5 of 20 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Ann Demakas, LTC Licenser
 Carla Rose, NCI Community Licenser

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.

Residential Care Services

07/14/2023

Date

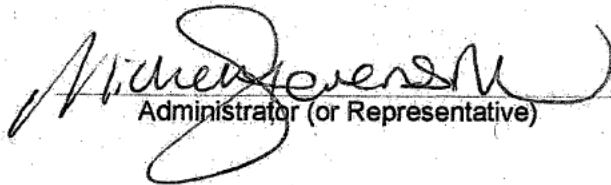
I understand that to maintain an Assisted Living Facility license, the facility must be in compliance with all the licensing laws and regulations at all times.

RECEIVED

JUL 31 2023

DSHS ALTA RCS
 SPOKANE VALLEY WA

This document was prepared by Residential Care Services for the Locator website.


Administrator (or Representative)

7/23/23
Date

WAC 388-78A-2100 On-going assessments. The assisted living facility must:

- (1) Complete a full assessment addressing the elements set forth in WAC 388-78A-2090 for each resident at least annually;

This requirement was not met as evidenced by:

Based observation, interview, and record review, the facility failed to do an annual safety assessment of medical equipment for 1 of 5 residents (Resident 1). This failed practice placed Resident 1 at risk of injury from utilizing equipment that had not been assessed to be safe and effective.

Findings included...

Observation on 07/12/2023 at 1:40 PM showed Resident 1 had bedrails installed on their bed.

Review of Resident 1's Negotiated Care Plan (the facility's titled Negotiated Service Agreement), dated 03/22/2023, showed Resident 1 was a high fall risk, required total one on one assistance from staff, and was diagnosed with [REDACTED] due to a traumatic brain injury. Further review showed Resident 1's mobility had decreased due to right side weakness and paralysis of their right hand.

Review of Resident 1's undated medical chart showed a Therapy Assessment for Bed Rails or Side Rails dated 08/17/2021. Further review of Resident 1's medical chart showed no annual safety assessment of the bedrails since the initial assessment on 08/17/2021.

In an interview on 07/12/2023 at 1:45 PM, Staff A, Registered Nurse, stated Resident 1 had a safety assessment completed when the bedrails were initially ordered in August 2021. Staff A stated they were not aware that a safety assessment needed to be completed annually.

Plan/Attestation Statement

Statement of Deficiencies	License #: 2556	Compliance Determination # 26503
Plan of Correction	Sycamore Glen at Quail Hollow	Completion Date
Page 3 of 3	Licensee: Sycamore Glen At Quail Hollow LLC	07/13/2023

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, Sycamore Glen at Quail Hollow is or will be in compliance with this law and / or regulation on (Date) 7/23/2023

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

Michelle Stevenson
Administrator (or Representative)

7/23/23
Date