STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

HSRE-PMB II TRS, LLC
GenCare Lifestyle Tacoma at Point Ruston
4970 Main St
Tacoma, WA 98407

RE: GenCare Lifestyle Tacoma at Point Ruston License # 2557

Dear Administrator:

This letter addresses Compliance Determination(s) 34115 (Completion Date 12/19/2023) and 28965 (Completion Date 09/26/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 12/19/2023 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-2480, WAC 388-78A-2480-1, WAC 388-78A-2160, WAC 388-78A-2690-12

The Department staff who did the on-site verification:
Shirley Grew, LTC Surveyor
Lisa Mason, NCI ALF Licensor

If you have any questions, please contact me at (253)442-3013.

Sincerely,

Manfay Chan, Field Manager
Region 3, Unit D
Residential Care Services

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Statement of Deficiencies	License #: 2557	Compliance Determination # 28965
Plan of Correction	GenCare Lifestyle Tacoma at Point Ruston	Completion Date
Page 1 of 5	Licensee: HSRE-PMB II TRS, LLC	09/26/2023

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 09/01/2023 and 09/18/2023 of:
GenCare Lifestyle Tacoma at Point Ruston
4970 Main St
Tacoma, WA 98407

The following sample was selected for review during the unannounced on-site visit: 9 of 71 current residents and 1 former residents.

The department staff that inspected the Assisted Living Facility:

Shirley Grew, LTC Surveyor
Lisa Mason, NCI ALF Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit D
PO Box 99250
Lakewood, WA 98496

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 — Date: 10/03/2023

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.

Nallely Gonzalez
Administrator (or Representative)

10/4/2023
Date

WAC 388-78A-2480 Tuberculosis Testing Required.

(1) The assisted living facility must develop and implement a system to ensure each staff person is screened for tuberculosis within three days of employment.

This requirement was not met as evidenced by:

Based on record reviews and interview, the Assisted Living Facility (ALF) failed to develop and implement a system to ensure 3 of 5 sampled staff members (Staff A, B, and D) were screened for tuberculosis (TB, a communicable disease) within three days of employment as required. This failure placed all 71 ALF residents at risk of TB infection.

Findings included...

Staff A, Executive Director, was hired on 03/03/2020. Review of Staff A's record failed to show results from a TB test done within three days of employment. Staff A's record showed a 2010 chest X-ray with no results provided.

Staff B, Caregiver, was hired on 10/13/2022. Review of Staff B's record failed to show results from a TB skin test done within three days of employment.

Staff D, Caregiver, was hired on 05/11/2023. Review of Staff D's record failed to show results from a TB skin test done within three days of employment.

During an interview on 09/18/2023 at 11:00 AM, Staff A stated that after their positive TB test, a chest X-ray was performed in 2010. Staff A did not have the results of their X-ray, nor did they have any symptom screening since that time. Staff A said they would attempt to obtain their chest X-ray results.

In an email on 09/25/2023 at 07:59 AM, Staff A reported they were unsuccessful in obtaining their chest X-ray results.

Plan/Attestation Statement

Statement of Deficiencies	License #: 2557	Compliance Determination # 28965
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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, GenCare Lifestyle Tacoma at Point Ruston is or will be in compliance with this law and / or regulation on (Date) 11/10/2023.

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

Nallely Gonzalez, Executive Director — 10/4/2023
Administrator (or Representative) — Date

WAC 388-78A-2160 Implementation of negotiated service agreement. The assisted living facility must provide the care and services as agreed upon in the negotiated service agreement to each resident unless a deviation from the negotiated service agreement is mutually agreed upon between the assisted living facility and the resident or the resident's representative at the time the care or services are scheduled.

This requirement was not met as evidenced by:

Based on record reviews and interviews, the Assisted Living Facility (ALF) failed to provide monthly licensed nurse charting and weekly showers for 3 of 9 sampled residents (Residents 2, 7 & 8) as agreed upon in the Negotiated Service Agreement (NSA). The ALF also failed to perform weekly licensed nurse skin assessments for 1 of 9 sampled residents (Resident 8) as agreed upon in the NSA. These failures placed residents at risk for skin infections and decreased skin integrity.

Findings included...

Resident 2

Record review on 09/06/2023 showed that Resident 2 (R2) was admitted to the ALF on [redacted]/2023 with diagnoses including [redacted] and [redacted] R2's NSA (Care Plan dated 01/12/2023) showed that a licensed nurse was to perform a monthly brief assessment and document in the chart. Review of R2's documentation showed no licensed nurse assessments or documentation for May, June, and July 2023.

Resident 7

Record review on 09/06/2023 showed that Resident 7 (R7) was admitted to the ALF on [redacted]/2023 with diagnoses including [redacted] and [redacted] R7's NSA (Care Plan dated 07/17/2023) showed that R7 was to receive two assisted showers per week. R7's record showed no documentation of

receiving a shower for the week of 07/24/2023 - 07/31/2023.

Resident 8

Record review on 09/06/2023 showed Resident 8 (R8) was admitted to ALF on [redacted]/2022 with diagnoses including [redacted] and [redacted]. The NSA (Care Plan dated 12/01/2022) showed R8 was to receive three showers per week with assistance, a licensed nurse to perform weekly skin assessments, and a licensed nurse to do a monthly brief assessment and document in the resident's chart.

No shower documentation was noted for the period 07/01/2023 - 07/22/2023 and 07/24/2023 - 07/29/2023; no skin assessment documentation was noted for June, July and August 2023; and no licensed nurse brief assessment documentation was noted for May, June, July, and August 2023.

During an interview on 09/15/2023 at 3:00 PM, Staff F, Corporate Wellness Nurse, said they were aware the NSA requirements of documentation were not being followed. Staff F stated that the electronic charting system did not have a feature to alert staff of missed documentation.

Plan/Attestation Statement

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

Nallely Gonzalez, Executive Director — 10/4/2023
Administrator (or Representative) — Date

WAC 388-78A-2690 Electronic monitoring equipment Resident requested use.

(12) If the assisted living facility determines that a resident, resident's family, or other third party is electronically monitoring a resident's room or apartment without complying with the requirements of this section, the assisted living facility must disconnect or remove such equipment until the appropriate consent is obtained and notice given as required by this section.

This requirement was not met as evidenced by:

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Based on interviews and record review the Assisted Living Facility (ALF) failed to ensure proper consent paperwork when family placed a video monitoring device in 1 of 3 resident's apartment (Resident 7). This failure caused potential resident rights violations when consent was not obtained and reviewed by the facility.

Findings included...

Record review on 09/01/2023 did not show a signed agreement for the video camera in Resident 7's (R7) apartment.

Interview on 08/31/2023 at 3:00 PM R7's Representative (RR1) said they had placed a video camera in R7's living room and the facility was aware.

Interview on 09/14/2023 at 1:00 PM, Staff A, Executive Director, said she was aware a camera was in R7's room, was told it wasn't working by RR1 and that there was no facility agreement signed.

Interview on 09/26/2023 at 9:30 AM, RR1 said they had never been asked to sign paperwork about the video camera.

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, GenCare Lifestyle Tacoma at Point Ruston is or will be in compliance with this law and / or regulation on (Date) 11/10/2023.

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

Nallely Gonzalez, Executive Director — 10/4/2023

Administrator (or Representative) — Date