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

Grand Park, LLC

Grand Park, LLC
242 St Helens Ave
Tacoma, WA 98402

RE: Grand Park, LLC License # 2603

Dear Administrator:

This letter addresses Compliance Determination(s) 45850 (Completion Date 09/26/2024) and 42561 (Completion Date 07/01/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/26/2024 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-2040-1

The Department staff who did the on-site verification:
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

Residential Care Services
Investigation Summary Report

Provider/Facility: Grand Park, LLC
Provider Type: Assisted Living Facility
License/Cert.#: 2603
Compliance Determination #: 42561
Intake ID: 132649
Investigator: Lisa Mason
Region/Unit #: RCS Region 3 / Unit D
Investigation Date(s): 06/11/2024 through 07/01/2024
Complainant Contact Date(s):

Allegation(s):
A facility failed the 3rd Fire Safety Inspection.

Investigation Methods:

Sample:	Total residents: 110 Resident sample size: 0 Closed records sample size: 0
Observations:	Residents Activities Dining Resident rooms Kitchen Food preparation
Interviews:	Residents Maintenance staff
Record Reviews:	Maintenance logs

Investigation Summary:
Record review showed the facility had failed to meet all the requirements for the third fire safety inspection. Interviewed Administrator and Environmental Services Director said they were aware of the areas still requiring corrections.

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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PO Box 99250, Lakewood, WA 98496

Statement of Deficiencies	License #: 2603	Compliance Determination # 42561
Plan of Correction	Grand Park, LLC	Completion Date
Page 1 of 3	Licensee: Grand Park, LLC	07/01/2024

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 06/11/2024 and 06/11/2024 of:

Grand Park, LLC
242 St Helens Ave
Tacoma, WA 98402

This document references the following complaint number(s): 132649

The following sample was selected for review during the unannounced on-site visit: 0 of 110 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

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

07/01/2024
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: 7/22/24

WAC 388-78A-2040 Other requirements.

(1) The assisted living facility must comply with all other applicable federal, state, county and municipal statutes, rules, codes and ordinances, including without limitations those that prohibit discrimination.

This requirement was not met as evidenced by:

Based on interview and record review the Assisted Living Facility (ALF) failed a 3rd Fire and Life Safety Inspection from the Fire Marshall Inspectors office. This failure placed all 110 residents at risk for harm.

Findings included...

On 6/11/2024 a record review of the Fire Marshall reports of non-compliance dated 01/02/2024, 03/06/2024 and 05/28/2024 showed numerous deficiencies had not been corrected.

On 6/11/2024 at 11:00 AM, an interview with Staff A, Administrator, said he was aware the facility was out of compliance with the fire codes and indicated the Environmental Services Director was tasked with follow up.

On 6/11/2024 at 11:30 AM, an interview with Staff B, Environmental Services Director, said he was aware some items still needed to be completed. He said every resident's door had to be inspected and fire zone/life expectancy checks were still needed.

On 07/01/2024 at 11:55 AM, an interview with Staff B said some items on the final list still had to be completed. He said some of the required documentation listed had been obtained for the Fire Marshall Inspector.

Plan/Attestation Statement

* SEE Attached

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, Grand Park, LLC is or will be in compliance with this law and / or regulation on (Date) 8/15/2024

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

Administrator (or Representative) — Date: 7/22/24

Cascade Park Vista 242 Saint Helens Ave Tacoma, WA 98402

Violations and status

Section 901

IFC 903.520092 2012, 2015,2018

3 year Full Trip test Report	completed	5/3/24
Sprinkler Heads in walk in cooler	Completed	6/20/24

IFC904.520092 2012, 2015,2018

Fusible link Hood System	completed	5/29/24

IFC 904.12.5.2 2018

Hood Inspection	Completed	5/29/24

IFC 907.8 2018

Fire system in silence Mode	Completed	5/30/24

(1 Trouble remains ground fault in system Patriot will reschedule does not effect system from working)

4 NFPA 80 Fire Door Inspection 5.2.4.1

Resident Room Fire Doors	completed	6/20/24

IFC 701.6 2018 WAC 51-54A 602.4.1 602.4.2 703 thru 707

Fire-resistant-rated construction Pending

Have contacted **LSS** *Life Safety Services,* Mark Porter 360-449-9079. (Item cannot be completed until survey of building is complete.)

IFC 5303.5 2018

Securing compressed gas containers completed 6/2024

(trained care staff on how to store container's)