



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

08/04/2025

Snohomish ALC LLC
Cottages of Snohomish
1124 Pine Ave
Snohomish, WA 98290

RE: Cottages of Snohomish # 2740

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 63565 (Completion Date 08/04/2025) and 55079 (Completion Date 05/12/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 08/04/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 388-78A-2350 Coordination of health care services.

(1) The assisted living facility must coordinate services with external health care providers to meet the residents' needs, consistent with the resident's negotiated service agreement.

The Department staff who did the On Site verification:
Cynthia Chenot-Potter, Nursing Consultant Institutional

If you have any questions, please contact me at (253)234-6020.

Sincerely,

Laurie Anderson

Laurie Anderson, Community Field Manager
Region 2, Unit A
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: Cottages of Snohomish

Provider Type: Assisted Living Facility

License/Cert. #: 2740

Intake ID: 159497

Compliance Determination #: 55079

Region/Unit #: RCS Region 2 / Unit A

Investigator: Cynthia Chenot-Potter

Investigation Date(s): 12/19/2024 through 05/12/2025

Complainant Contact Date(s):

Allegation(s):

1. The Assisted Living Facility (ALF) was not providing housekeeping and laundry services to the Named Resident (NR).
2. The ALF lost a medication.
3. The ALF did not assist with coordination of care.
4. There is not a nurse on duty 40 hours a week at the ALF.
5. The ALF did not notify family/POA when the Named Resident fell.

Investigation Methods:

Sample:	Total residents: 47 Resident sample size: 3 Closed records sample size: 0
Observations:	Identified resident Residents Resident rooms Laundry room
Interviews:	Nursing staff Residents Family members Administrator Housekeeping staff
Record Reviews:	Medical records Staff patterns Incident Report

Investigation Summary:

1. The Named Resident (NR) denied having any concerns regarding the housekeeping and laundry services done by the Assisted Living Facility (ALF) staff. ALF staff report they wash linens on resident shower days and remove trash from resident's rooms daily as their standard of light housekeeping. No odors or significant dirt was observed. No failed practice was identified.
2. Reviewed Medication Administration Record (MAR) for the NR. Medications were received from the pharmacy and given within 1 day of order received. No missed

doses noted. No failed practice was identified.

3. The NR had mild memory loss and records showed they needed assistance with outside provider coordination. ALF staff verified they did not assist the NR when they had a telehealth appointment. Failed practice identified. Facility cited under WAC 388-78A-2350 (1).

4. The ALF disclosure of services was reviewed; there was no stipulation of hours a nurse would be on duty in the ALF. No failed practice was identified.

5. The NR had mild memory loss and was independent in their room. They notified the ALF staff they had fallen. The staff assessed the NR and EMS was called and assessed the NR, but the NR declined to go to the hospital. Review of the incident report indicated that the ALF staff notified the POA and the NR's medical provider at the time of the fall. No failed practice was identified.

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A



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Statement of Deficiencies	License #: 2740	Compliance Determination # 55079
Plan of Correction	Cottages of Snohomish	Completion Date
Page 1 of 3	Licensee: Snohomish ALC LLC	05/12/2025

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 12/19/2024 of:

Cottages of Snohomish
1124 Pine Ave
Snohomish, WA 98290

This document references the following complaint number(s): 159497, 165956

The following sample was selected for review during the unannounced on-site visit: 3 of 47 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Cynthia Chenot-Potter, Nursing Consultant Institutional

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit A
3906-172nd St NE, Suite #100
Arlington, WA 98223

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

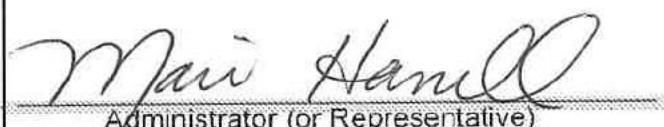
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As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.


Residential Care Services

5/13/2025
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)

5/13/2025
Date

WAC 388-78A-2350 Coordination of health care services.

(1) The assisted living facility must coordinate services with external health care providers to meet the residents' needs, consistent with the resident's negotiated service agreement.

This requirement was not met as evidenced by:

Based on interviews and record reviews, the Assisted Living Facility (ALF) failed to coordinate services with external providers for 1 of 3 residents (Resident 1) when Resident 1 needed an appointment to set up Home Health services. This failure resulted in the ALF not participating in care planning and placed Resident 1 at risk of not receiving medical care from their provider.

Findings included:

Review of the ALF's undated Disclosure of Services, Section 1(C) Services/Care, received on 01/30/2025, showed "Arranging Health Care Appointments: All assisted living facilities must help you arrange health care appointments and remind you of them, as necessary."

Review of an undated Face Sheet showed Resident 1 was admitted to the ALF on [REDACTED]/2022.

Review of a Negotiated Service Agreement (NSA) dated 11/18/2024 showed Resident 1 required ALF staff assistance to coordinate care with physicians and outside providers.

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Page 3 of 3	Licensee: Snohomish ALC LLC	05/12/2025

On 01/02/2025 at 2:09 PM Collateral Contact (CC), family, stated that they had set up an appointment for Resident 1 to have a telehealth appointment on 12/18/2024 to establish Home Health. CC stated that they notified Staff A, Executive Director, on 12/17/2024 about the appointment, and that Resident 1 would need assistance to log onto their cell phone for the appointment. CC stated that they were told by Staff A the ALF staff do not help with that type of appointment. CC stated that they had to go to the ALF to do the home health intake for Resident 1. ALF staff were not present and were unaware of Resident 1's need for further care due to the ALF staff not participating in the appointment to set up Home Health.

On 1/30/2025 at 2:23 PM Staff A stated that ALF staff would not help a resident with getting logged onto their phone, tablet or laptop for a telehealth appointment, the resident's family would have to come in and help with that.

On 5/7/2025 at 10:10 AM, Staff B, new Executive Director, stated that ALF staff should assist a resident to log onto their device for their appointment.

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, Cottages of Snohomish is or will be in compliance with this law and / or regulation on (Date) 6/26/2025

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


Administrator (or Representative)

5/13/2025
Date