



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Covenant Living West
Covenant Living West
9115 FORTUNA DRIVE
MERCER ISLAND, WA 98040

RE: Covenant Living West License # 958

Dear Administrator:

This letter addresses Compliance Determination(s) 30825 (Completion Date 10/13/2023) and 28998 (Completion Date 09/07/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 10/13/2023 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-2210-2, WAC 388-78A-2210-1-b

The Department staff who did the on-site verification:
Lisa Hauk, Complaint Investigator

If you have any questions, please contact me at (425)670-6070.

Sincerely,

Jamie Singer

Jamie Singer, Field Manager
Region 2, Unit J
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: Covenant Living West **Provider Type:** Assisted Living Facility
License/Cert.#: 958
Compliance Determination #: 28998 **Intake ID:** 94755
Investigator: Lisa Hauk **Region/Unit #:** RCS Region 2 / Unit J
Investigation Date(s): 09/05/2023 through 09/07/2023
Complainant Contact Date(s):

Allegation(s):

The Named Resident (NR) did not receive ordered medications from the Assisted Living Facility (ALF).

Investigation Methods:

Sample:	Total residents: 35 Resident sample size: 2 Closed records sample size: 1
Observations:	Residents Resident rooms Staff to resident interactions Resident to resident interactions
Interviews:	Administrator Nurse Residents Others not associated with the ALF
Record Reviews:	Characteristics Roster Facility Policies Resident Records

Investigation Summary:

Interview and record review showed the NR received a new medication orders from the doctor. The NR's family delivered the medications to the ALF. ALF staff did not transcribe the new medication orders and the NR did not receive the medications. See citation WAC 388-78A-2210(1)(b)(2).

Conclusion / Action:

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

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20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 958	Compliance Determination # 28998
Plan of Correction	Covenant Living West	Completion Date
Page 1 of 3	Licensee: Covenant Living West	09/07/2023

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 an unannounced on-site complaint investigation on 09/05/2023 and 09/05/2023 of:

Covenant Living West
9115 FORTUNA DRIVE
MERCER ISLAND, WA 98040

This document references the following complaint number(s): 94755

The following sample was selected for review during the unannounced on-site visit: 2 of 35 current residents and 1 former residents.

The department staff that investigated the Assisted Living Facility:

Lisa Hauk, Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2, Unit J
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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.

A handwritten signature in cursive script that reads "Jamie Singer".
Residential Care Services

9/11/2023

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.

Lacey A. Shea-Rumy, AED
Administrator (or Representative)
(for Debbie Gillaspie)

9/27/2023
Date

WAC 388-78A-2210 Medication services.

- (1) An assisted living facility providing medication service, either directly or indirectly, must:
- (b) Develop and implement systems that support and promote safe medication service for each resident.
- (2) The assisted living facility must ensure the following residents receive their medications as prescribed, except as provided for in WAC 388-78A-2230 and 388-78A-2250 :

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 2 residents (Resident 1) received their medications as prescribed by a physician. This failure resulted in Resident 1 missing scheduled medications and placed them at risk for health complications.

Findings included...

Record review of a Medication Administration Record (MAR) showed the ALF admitted Resident 1 on [REDACTED] /2023, with diagnoses of [REDACTED] and [REDACTED].

Record review of a Clinical Note dated 08/11/2023 showed Resident 1's Furosemide (used to treat buildup of fluid in the body) 20 milligrams (mg) was discontinued.

Record review of an After Visit Summary, dated 08/11/2023, showed a new medication order for torsemide (used to treat buildup of fluid in the body) 20mg and aspirin 81mg to be given on Mondays, Wednesdays and Fridays.

Record review of an August 2023 Medication Administration Record (MAR) showed Resident 1's furosemide 20 mg tablet was discontinued as ordered on 08/11/2023. Resident 1's new order for torsemide 20mg every Monday, Wednesday and Friday was not entered onto the August 2023 MAR.

In interview on 09/06/2023, at 11:42 AM Staff B (Nurse Manager) stated that Resident 1's wife delivered torsemide and aspirin from the pharmacy to the ALF on 08/11/2023 and Staff B placed them in the medication cart without checking what the medications were.

Statement of Deficiencies	License #: 958	Compliance Determination # 28998
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Staff B stated that Resident 1's new orders were not entered onto Resident 1's MAR.

Record review of a Clinical Note dated 08/21/2023, showed Staff B documented Resident 1 did not receive their ordered torsemide or aspirin.

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, Covenant Living West is or will be in compliance with this law and / or regulation on (Date) 8/22/2023

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

Debbie Dellaspie
Administrator (or Representative)

9/11/2023
Date