



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

ISQH, LLC
UNIVERSITY HOUSE AT ISSAQUAH
22975 SE BLACK NUGGET ROAD
ISSAQUAH, WA 98029

RE: UNIVERSITY HOUSE AT ISSAQUAH License # 1565

Dear Administrator:

This letter addresses Compliance Determination(s) 38286 (Completion Date 03/14/2024) and 34047 (Completion Date 12/28/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 03/14/2024 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-2410-8-a-iii, WAC 388-78A-2410-8-a-iv, WAC 388-78A-2466-1, WAC 388-78A-2466-1-a, WAC 388-78A-2466-1-b

The Department staff who did the on-site verification:

Thomas Forkgen, ALF Licenser
Michelle Yip, ALF Licenser

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

Sincerely,

Laurie Anderson

Laurie Anderson, Field Manager
Region 2, Unit D
Residential Care Services



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

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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 12/18/2023, 12/18/2023, 12/21/2023 and 12/21/2023 of:
UNIVERSITY HOUSE AT ISSAQUAH
22975 SE BLACK NUGGET ROAD
ISSAQUAH, WA 98029

The following sample was selected for review during the unannounced on-site visit: 7 of 43 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Thomas Forkgen, ALF Licenser
Michelle Yip, ALF Licenser

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2, Unit D
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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.

Laurie Anderson

Residential Care Services

01/03/2024

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.

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Susan Vahlkamp
Administrator (or Representative)

01/10/2024
Date

WAC 388-78A-2410 Content of resident records. The assisted living facility must organize and maintain resident records in a format that the assisted living facility determines to be useful and functional to enable the effective provision of care and services to each resident. Active resident records must include the following:

(8) Medical and nursing services provided by the assisted living facility for a resident, including:

(a) A record of providing medication assistance and medication administration, which contains:

(iii) The signature or initials of the person providing any medication assistance or administration; and

(iv) Documentation of a resident choosing to not take his or her medications.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to document the medication administration assistance provided for 4 or 7 sampled residents (Resident 2, Resident 3, Resident 4, and Resident 6) who required daily assistance with medications. This failure placed Resident 2, Resident 3, Resident 4, and Resident 6 at risk of medication errors and a potential decline in health.

Findings included...

Review of the facility's policy titled "Documentation of Medications MAR Management" showed that the staff were required to check the MAR for the five rights (right resident, right medication, right dose, right route, and right time) before they put the medication into the medicine cup and when they put the medicine cup into the medication carrier. The policy showed the staff were required to initial the box of the medication order on the MAR. The document showed the staff were required to circle their initials indicating which medication was refused by the resident. The document showed that the staff were required to circle their initials indicating which medication was omitted for any reason and to write on the back of the MAR the reason the medication was omitted.

RESIDENT 2

Review of Resident 2's Resident Health Evaluation and Negotiated Service Agreement (NSA), dated 09/23/2023, showed that the facility managed Resident 2's medications and provided medication assistance to Resident 2.

Review of Resident 2's October 2023, November 2023, and December 2023 MARs showed

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Resident 2's prescriptions included:

- Losartan (a drug used to lower blood pressure), 50 milligrams (mg), one tablet by mouth every day;
- Nitrofurantoin Macro (a drug used to treat and prevent urinary tract infection), 100 mg, one capsule by mouth every day;
- Acetaminophen (a drug used to reduce pain), 325 mg tablet, two tablets by mouth every six hours;
- Calcium Antacid (a drug used to treat upset stomach), 500 mg tablet, chew one tablet before swallowing;
- Latanoprost 0.005% ophthalmic solution (a drug used to reduce pressure in the eye), place one drop in left eye nightly;
- Aspirin (a drug used to prevent blood clots) Enteric Coated (EC), 81 mg tablet, one tablet by mouth every day;
- Cranberry (a dietary supplement), 425 mg powder capsule, two capsules by mouth every day;
- Metoprolol Succinate (a drug used to lower blood pressure), 25 mg tablet, one tablet by mouth every day;
- Myrbetriq (a drug used to treat overactive bladder), Extended Release (ER) 50 mg tablet, one tablet by mouth every day;
- Potassium (a mineral supplement) ER, 20 milliequivalent (mEq) tablet, one tablet by mouth every day;
- Torsemide (a drug used to treat heart diseases), 20 mg tablet, one tablet by mouth every day;
- Vitamin D3 (a supplement), 1000 International Unit (IU) softgel, two capsules daily;
- Ezetimibe (a drug used to treat high cholesterol levels), 10 mg tablet, one tablet by mouth nightly;
- Fenofibrate (a drug used to treat high blood fats) tablet, 160 mg, one tablet by mouth daily; nightly;
- Rosuvastatin (a drug used to lower blood fats), tablet 20 mg, one tablet by mouth every day.

Review of the October 2023 MAR showed no staff signoff for one dose of Losartan, one dose of Nitrofurantoin, eight doses of Acetaminophen, one dose of Calcium Antacid, one dose of Latanoprost eye drops.

Review of the November 2023 MAR showed no staff signoff for one dose of Losartan, two doses of Nitrofurantoin, 17 doses of Acetaminophen, two doses of Calcium Antacid, two doses of Latanoprost eye drops, one dose of Aspirin, one dose of Cranberry, one dose of Metoprolol, one dose of Myrbetriq, one dose of Potassium, one dose of Torsemide, one dose of Vitamin D3, two doses of Ezetimibe, two doses Fenofibrate, and two doses of Rosuvastatin.

Review of the December 2023 MAR showed no staff signoff for 15 doses of Acetaminophen.

The MARs showed there was no documentation that showed Resident 2 received these medications. There was no documentation on any of the MARs that showed Resident 2 refused the medication doses. There was no documentation on any of the MARs that

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showed any of the medication doses were omitted or the reasons for any omitted medications.

RESIDENT 3

Review of Resident 3's Resident Health Evaluation and Negotiated Service Agreement (NSA), dated 10/12/2023, showed that the facility managed Resident 3's medications and provided medication assistance to Resident 3.

Review of Resident 3's October 2023, November 2023, and December 2023 MARs showed that Resident 3's prescriptions included:

- Acetaminophen, 325 mg tablet, two tablets by mouth three times daily;
- Mirtazapine (a drug to treat depression), 15 mg tablet, half a tablet by mouth nightly;
- Eliquis (a drug used to prevent blood clots), 2.5 mg tablet, one tablet by mouth twice daily;
- Quetiapine (a drug used to treat mental health), 25 mg tablet, one tablet by mouth every evening;
- Nystatin (a drug used to treat fungal infections) 100,000 unit per gram powder, apply one application topically (outside of the body) two times daily.

Review of the October 2023 MAR showed no staff signoff for one dose of Acetaminophen, and one dose of Mirtazapine.

Review of the November 2023 MAR showed no staff signoff for three doses of Acetaminophen, six doses of Mirtazapine, three doses of Eliquis, and two doses of Quetiapine.

Review of the December 2023 MAR showed no staff signoff for two doses of Acetaminophen, one dose of Mirtazapine, and one dose of Nystatin.

The MARs showed there was no documentation that showed Resident 3 received these medications. There was no documentation on any of the MARs that showed Resident 3 refused the medication doses. There was no documentation on any of the MARs that showed any of the medication doses were omitted or the reasons for any omitted medications.

RESIDENT 4

Review of Resident 4's Resident Health Evaluation and Negotiated Service Agreement (NSA), dated 10/12/2023, showed that the facility managed Resident 4's medications and provided medication assistance to Resident 4.

Review of Resident 4's October 2023, November 2023, and December 2023 MARs showed that Resident 4's prescriptions included:

- Florastor (a probiotic supplement), 250 mg capsule, one capsule by mouth two

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times a day;

- Hydrocortisone (a drug used to calm down a body's immune response), 15 mg tablet, one tablet by mouth daily;
- Hydrocortisone, 10 mg tablet, one and a half tablets (15 mg total) by mouth daily;
- Hydrocortisone, 10 mg tablet, two and a half tablets (25 mg total) by mouth every morning;
- Ammonium Lactate (used to treat dry skin), apply bilateral lower extremities (BLE) topically, one time a day;
- Atorvastatin Calcium (a drug to treat high blood lipids), 10 mg tablet, 10 milliliters (ml [sic]) by mouth one time a day;
- Atorvastatin 10 mg tablet, one tablet by mouth daily at bedtime;
- Flonase (a drug to treat allergy) allergy nasal spray, 50 microgram (mcg)/Activator (ACT), one spray in both nostrils, one time a day;
- Megestrol (a drug to treat weight loss), 400 mg per 10 ml suspension, 10 ml by mouth one time a day;
- Topamax (a drug that calms overactive nerves), 100 mg tablet, one tablet by mouth at bedtime;
- Mirtazapine, 15 mg disintegrating tablet, one tablet by mouth at bedtime;
- Montelukast (a drug used to treat asthma), 10 mg tablet, one tablet by mouth at bedtime;
- Lidocaine (a drug used to relieve pain), 5% patch applied to thoracic back topically one time a day;
- Furosemide (a drug used to treat fluid retention), 20 mg tablet, one tablet by mouth every day, (the medication order was discontinued on 11/28/2023);
- Furosemide, 20 mg tablet, one tablet by mouth twice daily, (the medication order was started on 11/28/2023 and was discontinued on 12/01/2023);
- Furosemide, 20 mg tablet, one tablet by mouth once daily, (the medication order was started on 12/02/2023);
- Carvedilol (a drug used to lower blood pressure), 3.125 mg tablet, one tablet by mouth two times a day;
- Vitamin D3, 25 mcg, one tablet by mouth one time a day;
- Acyclovir (a drug used to treat virus infections) tablet, 400 mg, one tablet by mouth every day;
- Atovaquone suspension (a drug used to treat pneumonia), 750 mg per five ml, 10 ml by mouth every day;
- Bupropion (a drug used in smoking cessation) ER (extended-release), 300 mg tablet, one tablet by mouth every day;
- Cal-Gest Chew (a drug used to treat upset stomach), 500 mg chew and swallow two tablets (1000 mg total) by mouth every day;
- Centrum Silver (a vitamin supplement) tablet, one tablet by mouth every day;
- Creon (a drug used to treat malabsorption syndrome), 24,000-unit capsule, two capsules by mouth with meals;
- Fluticasone (a drug used to relieve allergy symptoms) nasal spray, 50 mcg inhale 1 spray in each nostril every day;
- Folic acid (a supplement), one mg tablet, one tablet by mouth every day;
- Topiramate (a drug used to prevent migraine headaches), 100 mg tablet, one tablet by mouth daily at bedtime;
- Jardiance (a drug used to improve blood glucose control), half a five mg tablet by mouth every day;
- Loratadine (a drug used to relieve allergy symptoms), 10 mg tablet, one tablet by mouth every day;
- Magnesium Oxide (a drug used to relieve heartburn) tablet, 400 mg, one tablet by

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mouth every day;

- Pantoprazole Sodium (a drug used to treat acid reflux), 40 mg delay release (D/R) tablets, one tablet by mouth every day;
- Sirolimus (a drug used to prevent organ rejection) tablet, 0.5 mg, one tablet by mouth every other day;
- Spironolactone (a drug used to treat high blood pressure), 25 mg tablet, one tablet by mouth every day weekly;
- Cefdinir (a drug used to treat bacterial infections), 300 mg capsule, one capsule by mouth two times a day;
- Aspirin, 81 mg, one tablet by mouth daily;
- Eliquis, five mg, two tablets by mouth two times a day for seven days between 11/29/2023 and 12/05/2023; then one tablet (five mg) by mouth two times a day for 23 days between 12/06/2023 and 12/28/2023;
- Metoprolol Succinate (a drug used to treat chest pain and high blood pressure), ER 25 mg tablet, half a tablet by mouth daily at bedtime;
- Tobramycin 0.3% Dexamethasone 0.1% eye drops suspension (a drug used to treat eye infection), instill one drop by ophthalmic (eye) route three times per day for one week between 12/02/2023 and 12/08/2023, then two times a day for three weeks into affected eyes (both eyes);
- Potassium Chloride ER, 10 mEq tablet, two tablets (20 mEq total) by mouth daily.

Review of the October 2023 MAR showed no staff signoff for five doses of Florastor, four doses of Hydrocortisone, 12 doses of Ammonium Lactate, three doses of Atorvastatin, one dose of Flonase, one dose of Megestrol, three doses of Topamax, four doses of Mirtazapine, three doses of Montelukast, one dose of Lidocaine, one dose of daily Furosemide, one dose at 2:00 PM on 11/30/2023, four doses of Carvedilol, and one dose of Vitamin D3.

Review of the November 2023 MAR showed no staff signoff for two doses of Florastor, three doses of Hydrocortisone (15 mg), one dose of Hydrocortisone (25 mg), one dose of Ammonium Lactate, two doses of Atorvastatin, two doses of Megestrol, two doses of Mirtazapine, two doses of Montelukast, one dose of Lidocaine, one dose of Furosemide, three doses of Carvedilol, one dose of Vitamin D3, one dose of Acyclovir, one dose of Atovaquone, one dose of Bupropion, one dose of Cal-Gest Chew, one dose of Centrum Silver, one dose of Creon, one dose of Fluticasone, one dose of Folic acid, three doses of Topiramate, one dose of Jardiance, one dose of Loratadine, one dose of Magnesium Oxide, one dose of Pantoprazole Sodium, one dose of Sirolimus, one dose of Spironolactone and no documentation of vital signs for these two doses, one dose of Cefdinir, and one dose of Aspirin.

Review of the December 2023 MAR showed no staff signoff for two doses of Florastor, one dose of Hydrocortisone, five doses of Furosemide, one dose of Atovaquone, one dose of Sirolimus, one dose of Spironolactone, seven doses of Cefdinir, one dose of Aspirin, nine doses of Eliquis, two doses of Metoprolol Succinate, eight doses of Tobramycin 0.3% Dexamethasone 0.1% eye drops, and one dose of Potassium Chloride.

The MARs showed there was no documentation that showed Resident 4 received these medications. There was no documentation on any of the MARs that showed Resident 4

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refused the medication doses. There was no documentation on any of the MARs that showed the medication doses were omitted or the reasons for any omitted medications.

RESIDENT 6

Review of Resident 6's Resident Health Evaluation and Negotiated Service Agreement (NSA), dated 09/07/2023, showed that the facility managed Resident 6's medications and provided medication assistance to Resident 6.

Review of Resident 6's interdisciplinary resident note documented on 11/25/2023 at 1:41 PM, showed Resident 6 was diagnosed with cellulitis (bacterial infection) of right lower leg. The note showed that Keflex (antibiotic) 500 mg was prescribed, one capsule by mouth four times a day for seven days for a total of 28 capsules to be administered.

Review of Resident 6's November 2023 MAR showed an order for Cephalexin (Keflex) 500 mg capsules, one capsule four times daily for seven days. The MAR showed that the antibiotic started at 8:00 PM, on 11/25/2023. The MAR showed that on 11/27/2023 the initials of Staff M, Registered Nurse, were circled to indicate the medication was not given as ordered. There was no explanation documented on the back of the MAR or in the interdisciplinary resident note.

Review of Resident 6's December 2023 MAR showed that there were two doses that were not signed for (initial boxes were left blank) on 12/02/2023 at noon and on 12/03/2023 at 8:00 AM. There was no explanation documented on the back of the MAR.

Review of the November 2023 and December 2023 MARs showed that excluding the circled and blank boxes the facility staff documented 30 antibiotic capsules were dispensed to Resident 6.

During an interview on 12/20/2023 at noon, Staff L, Registered Nurse, Community Health Director, stated that the facility required all staff to follow the facility's policy to dispense and document the medications in the resident MARs. Staff L stated that they were aware there were missing signoffs the medications in the MARs for Resident 2, Resident 3, and Resident 4. Staff L stated they hired agency staff to administer medication when the facility was short staffed. Staff L stated that the agency staff administered the medications for Resident 2, Resident 3, and Resident 4, and the agency staff did not sign off the medications after they administered the medications, as required. Staff L stated that they requested the agency staff return to the facility and sign off the medications in the MARs. Staff L stated that the agency staff did not return to the facility to complete the MAR documentation.

During an interview on 12/20/2023 at 3:30 PM, Staff L stated that staff nurses confirmed that the missed signatures and circled initials on Resident 6's November 2023 and December 2023 MARs showed the antibiotic as not given. Staff L stated that the additional signatures showed the missed doses of antibiotic were given to make up for the three missed doses. Staff L confirmed November 2023 and December 2023 MARs showed staff

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documented 30 antibiotic capsules as given. Staff L stated they did not know why two extra doses were signed as given. Staff L stated that the pharmacy only dispensed 28 capsules, so it was not possible for Resident 6 to have received more than the prescribed amount. Without proper documentation of the circled box and the missing initials, it was unclear the total number of antibiotic doses Resident 6 received.

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, UNIVERSITY HOUSE AT ISSAQUAH is or will be in compliance with this law and / or regulation on
(Date) 02/16/2024.

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

Susan Vahetkamp
Administrator (or Representative)

01/10/2024
Date

WAC 388-78A-2466 Background checks Washington state name and date of birth background check Valid for two years National fingerprint background check Valid indefinitely.

(1) A Washington state name and date of birth background check is valid for two years from the initial date it is conducted. The assisted living facility must ensure:

(a) A new DSHS background authorization form is submitted to the department's background check central unit every two years for all administrators, caregivers, staff persons, volunteers and students; and

(b) There is a valid Washington state name and date of birth background check for all administrators, caregivers, staff persons, volunteers and students.

This requirement was not met as evidenced by:

Based on record review and interview, the facility failed to complete a Washington State name and date of birth background check (BGI) every two years for 2 of 9 sampled staff (Staff E and Staff I). This failure placed all residents at risk of abuse, neglect, or exploitation from caregivers with unknown backgrounds.

Findings included...

STAFF E

Review of the facility's employee roster showed the facility hired Staff E, Lead Resident Assistant, on 11/11/2021. Review of the records showed that Staff E's initial Washington state name and date of birth BGI expired on 11/11/2023. The records showed that on 12/18/2023, the facility completed a new BGI, 36 days after the initial BGI expired.

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During an interview on 12/20/2023 at 3:00 PM, Staff K, Executive Director, acknowledged the facility completed Staff E's BGI late. Staff K stated that Staff E's BGI was a little late. Staff K stated that when they realized Staff E's BGI had expired, they immediately processed a new BGI.

STAFF I

Review of the facility's employee roster showed the facility hired Staff I on 12/07/2021 as a food server. Review of the records showed that Staff I's initial Washington state name and date of birth BGI expired on 12/07/2023. The records showed that on 12/21/2023, the facility completed a new BGI, 14 days after the initial BGI expired.

During an interview on 12/21/2023 at 12:05 PM, Staff K stated that they were aware Staff I's BGI was expired. Staff K stated a new BGI was completed on 12/21/2023.

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, UNIVERSITY HOUSE AT ISSAQUAH is or will be in compliance with this law and / or regulation on

(Date) 02/16/2024.

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

Susan Vahelkamp
Administrator (or Representative)

01/10/2024
Date