



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Home and Community Living Administration
PO Box 45600, Olympia, WA 98504-5600

August 31, 2026

ELECTRONIC-FACSIMILE

Administrator
NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY
c/o 3425 Boone Road SE
Salem, OR 97317

Assisted Living Facility License # **1995**
Licensee: NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY LLC

IMPOSITION OF CIVIL FINES,
IMPOSITION OF CONDITIONS ON A LICENSE AND
STOP PLACEMENT ORDER PROHIBITING ADMISSIONS

Dear Administrator:

On August 18, 2026, the Department of Social and Health Services (DSHS), Residential Care Services completed a follow-up at your facility. This letter constitutes formal notice of civil fines, imposition of conditions on the license and stop placement order prohibiting admissions for your assisted living facility, also known as **NORTH CREEK RETIREMENT & ASSISTED LIVING COMMUNITY**, located at **1907 201ST PLACE SE, BOTHELL**, by the State of Washington, Department of Social and Health Services. These actions are taken under the authority granted pursuant to Laws of 1998, Chapter 272 and RCW 18.20.190 and 18.20.520.

The civil fines, conditions on the license and stop placement order prohibiting admissions are based on the following violations of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated **August 18, 2026**.

Civil Fines

WAC 388-78A-2210 (1)(a)(b)(2)(a)(b) Medication services.

\$1000.00

The licensee failed to implement systems to support and ensure safe medication management for one resident. This failure resulted in the resident receiving prescribed medications incorrectly and placed them at risk for health complications.

This is an uncorrected deficiency previously cited on May 26, 2026, and a recurring deficiency previously cited on March 14, 2024, November 6, 2024, March 5, 2025, and June 9, 2025.

WAC 388-78A-2320 (1)(a)(2)(a)(b) Intermittent nursing services systems. **\$1000.00**

The licensee failed to ensure four staff members had nurse delegation certification and were delegated prior to administering oral medications, performing blood glucose monitoring through finger-sticks and administering insulin, and five staff members had not completed the required observational visits for insulin delegation. This failure resulted in four residents receiving skilled nursing tasks conducted by unqualified staff and placed them at risk of harm.

This is an uncorrected deficiency previously cited on May 26, 2026, and a recurring deficiency previously cited on March 17, 2025, and June 9, 2025.

Stop Placement order prohibiting admissions

WAC 388-78A-2210 (1)(a)(b)(2)(a)(b) Medication services.

The licensee failed to implement systems to support and ensure safe medication management for one resident. This failure resulted in the resident receiving prescribed medications incorrectly and placed them at risk for health complications.

This is an uncorrected deficiency previously cited on May 26, 2026, and a recurring deficiency previously cited on March 14, 2024, November 6, 2024, March 5, 2025, and June 9, 2025.

WAC 388-78A-2320 (1)(a)(2)(a)(b) Intermittent nursing services systems.

The licensee failed to ensure four staff members had nurse delegation certification and were delegated prior to administering oral medications, performing blood glucose monitoring through finger-sticks and administering insulin, and five staff members had not completed the required observational visits for insulin delegation. This failure resulted in four residents receiving skilled nursing tasks conducted by unqualified staff and placed them at risk of harm.

This is an uncorrected deficiency previously cited on May 26, 2026, and a recurring deficiency previously cited on March 17, 2025, and June 9, 2025.

The stop placement order prohibiting admissions to your assisted living facility is effective immediately upon **verbal** notice to you on **August 25, 2026**, and electronic facsimile receipt of this letter and the attached Statement of Deficiencies report. The stop placement order prohibiting admissions will not be postponed pending an administrative hearing or informal dispute resolution process, as is required by RCW 18.20.190(4). The stop placement applies to all new admissions, re-admissions, and transfer of residents.

During the stop placement, you may not admit any new resident to your assisted living facility. In addition, you may not allow any resident who was absent from the home due to a temporary non-out-patient stay (not including out-patient treatment) at a hospital, nursing home or other treatment center to return during the stop placement unless you obtain advance approval from the department. You may request such approval by contacting Jamie Singer, Field Manager, at (425) 977-6821.

Because it may not be possible to reach the Field Manager on a weekend or holiday, any pre-approval requests should be made as soon as possible during the business week. Such exceptions are made at the sole discretion of the department on a case-by-case basis. The department may impose sanctions or take other legal action if you fail to comply with the stop placement of admissions.

The department will terminate the stop placement order prohibiting admissions when the violations necessitating the stop placement have been corrected and you exhibit the capacity to maintain adequate care and service.

Conditions on License

WAC 388-78A-2210 (1)(a)(b)(2)(a)(b) Medication services.

The licensee failed to implement systems to support and ensure safe medication management for one resident. This failure resulted in the resident receiving prescribed medications incorrectly and placed them at risk for health complications.

This is an uncorrected deficiency previously cited on May 26, 2026, and a recurring deficiency previously cited on March 14, 2024, November 6, 2024, March 5, 2025, and June 9, 2025.

WAC 388-78A-2320 (1)(a)(2)(a)(b) Intermittent nursing services systems.

The licensee failed to ensure four staff members had nurse delegation certification and were delegated prior to administering oral medications, performing blood glucose monitoring through finger-sticks and administering insulin, and five staff members had not completed the required observational visits for insulin delegation. This failure resulted in four residents receiving skilled nursing tasks conducted by unqualified staff and placed them at risk of harm.

This is an uncorrected deficiency previously cited on May 26, 2026, and a recurring deficiency previously cited on March 17, 2025, and June 9, 2025.

The department has determined that the following conditions shall be placed on your assisted living facility license:

- *The licensee must hire, at their own expense, a Registered Nurse Consultant (RNC) not currently or previously associated with the facility no later than September 16, 2026, who is familiar with assisted living facility regulations, to assist with the following:*
- *Assess the current medication system and if necessary, develop a new system or modify the existing system to comply with all applicable medication regulations for assisted living facilities to include but not limited to WAC 388-78A-2210 and WAC 388-78A-2320.*
- *Train all current staff performing as medication technicians in the new or updated medication system to ensure a clear understanding of safe medication delivery and to ensure residents receive medications on time as prescribed.*
- *Audit the medication delivery system weekly until such a time as the facility can demonstrate sustained compliance with WAC 388-78A-2210 and WAC 388-78A-2320.*
- *Ensure ALL staff providing nursing delegation services have completed credential verification and have DSHS Nurse Delegation certifications by October 1, 2026.*
- *Ensure Nurse Delegation training to include weekly RND supervision and evaluation no later than at least every two weeks for the first four weeks by October 16, 2026.*
- *Ensure only staff with current necessary qualifications provide delegated tasks to any resident assessed to need the service.*
- *Develop and implement processes for staff providing nurse delegation tasks to not pass medications until they are delegated to do so.*
- *The licensee will provide the RNC with a copy of the Statement of Deficiencies report by September 16, 2026.*
- *The licensee will provide the Residential Care Services (RCS) Field Manager with the RNC contact information as soon as the RNC is hired.*

- *The licensee must meet with the RCS Field Manager and Regional Administrator to discuss pattern of non-compliance and Department expectations by September 23, 2026.*
- *The RNC will be available to the Department for questions.*
- *The RNC will send weekly progress reports to the RCS Field Manager for review.*
- *The licensee must post this Notice of Conditions of Operation, with the license, in a visible location in a common use area accessible to residents and visitors.*

These conditions are effective upon **verbal** notice to you on **August 25, 2026**, and remain in effect until lifted by formal Department of Social and Health Services notice.

NOTE: These are the violations, which resulted in the fines, conditions on a license and stop placement order prohibiting admissions; see the attached Statement of Deficiencies for any additional violations. These deficiencies are also included as violations of your conditional certification of Memory Care.

Attestation (Plan of Correction):

Return the enclosed SOD within 10 calendar days with the following:

- The date you have or will have each deficiency corrected;
- A signature and date attesting that you are taking actions to correct and maintain correction for each cited deficiency.

Return the signed and dated SOD to:

Jamie Singer, Field Manager
Region 2, Unit J
20311 52nd Avenue West Suite 100
Lynnwood, WA 98036
Phone: (425) 977-6821 / Fax: (206) 971-6791
rcsregion2email@dshs.wa.gov

Appeal Rights:

You have two appeal rights: Informal Dispute Resolution (IDR) and an Administrative Hearing. Each has a different request timeline.

Informal Dispute Resolution [RCW 18.20.195]

You have an opportunity to challenge the deficiencies and/or enforcement actions through the state's IDR process. **All IDR requests must be in writing and include:**

- The deficiencies you are disputing; and
- The method of review you prefer (face-to-face, telephone conference or documentation review).

The written request must be received by the 10th working day from receipt of this letter.

During the IDR process, you will have the opportunity to present written and/or oral evidence to dispute the deficiencies.

You can make an IDR request and find directions on the IDR web page at:

<http://www.dshs.wa.gov/altsa/idr>.

Formal Administrative Hearing

You may contest the civil fines, conditions on a license or stop placement order prohibiting admissions by requesting a formal administrative hearing to challenge the deficiencies, which resulted in the civil fines. **All hearing requests must be in writing and include:**

- A copy of this letter; and
- A copy of the Statement of Deficiencies.

The written request must be received within twenty-eight (28) calendar days of receipt of this letter.

Send your **written** request to:

Office of Administrative Hearings
PO Box 42489
Olympia, Washington 98504-2489

Payment:

If you do not request a formal administrative hearing, the civil fines are due to the Office of Financial Recovery twenty-eight (28) calendar days after receipt of this letter.

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Mail a check for **\$2,000.00** payable to the 'Department of Social and Health Services', **and if you have or have had a Medicaid resident(s), please include your ProviderOne ID Number # on the check**, to:

DSHS Office of Financial Recovery
PO Box 9501
Olympia, WA 98507-9501
(360) 664-5919 / FAX: (360) 664-8401
OFRMMISVendor@dshs.wa.gov

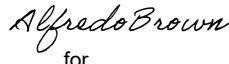
If the Office of Financial Recovery has not received your payment within twenty-eight (28) days after receipt of this letter, interest will begin to accrue immediately on the balance, at the rate of one percent per month. If you do not submit a hearing request or make payment within twenty-eight (28) days, the balance due will be recovered.

NOTICE: State and federal law provide protections to defendants who are in military service, and to their dependents. Dependents of a service member are the service member's spouse, the service member's minor child, or and individual for whom the service member provided more than one-half of the individual's support for one hundred eight days immediately preceding an application for relief.

One protection provided is the protection against the entry of a default judgment in certain circumstances. This notice pertains only to a defendant who is a dependent of a member of the National Guard or a military reserve component under a call to active service, or a National Guard member under a call to service authorized by the governor of the state of Washington, for a period of more than thirty consecutive days. Other defendants in military service also have protections against default judgments not covered by this notice. If you are the dependent of a member of the national guard or a military reserve component under a call to active service, or a national guard member under a call to service authorized by the governor of the state of Washington, for a period of more than thirty consecutive days, you should notify the Department in writing of your status as such within twenty days of the receipt of this notice. If you fail to do so, then a court or an administrative tribunal may presume that you are not a dependent of an active duty member of the national guard or reserves, or a national guard member under a call to service authorized by the governor of the state of Washington, and proceed with the entry of an order of default and/or a default judgment without further proof of your status. Your response to the Department about your status does not constitute an appearance for jurisdictional purposes in any pending litigation nor a waiver of your rights.

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If you have any questions, please contact Jamie Singer, Field Manager, at (425) 977-6821.

Sincerely,

for
Matt Hauser
Compliance Specialist
Residential Care Services

Enclosure

cc: Field Manager, Region 2, Unit J
RCS Regional Administrator, Region 2
HCS Regional Administrator, Region 2
DDA Regional Administrator, Region 2
WA LTC Ombuds
WA Cares
Office of Financial Recovery, Vendor Program Unit
HQ Central Files
DRW
SN

REQUEST FOR AN ON-SITE REVISIT WITHIN 15 WORKING DAYS

FACILITY: _____

ADDRESS: _____

DATE REQUEST FAXED: _____ **DATE MAILED:** _____

TO: _____, Field Manager, Region ____ Unit ____

I believe we have corrected the violations that led to my facility/home being placed in stop placement of new admissions. I am requesting an onsite revisit within 15 working days of receipt of this letter to verify that correction(s) is complete.

The following steps have been taken to ensure lasting correction.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Licensee or Designee Signature

Date