STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Long-Term Support Administration
PO Box 45600, Olympia, WA 98504-5600

February 27, 2024

ELECTRONIC-FACSIMILE

Administrator
Cordata Court, Assisted Living & Memory Care
4415 Columbine Dr
Bellingham, WA 98226

Assisted Living Facility License #**2481**
Licensee: PSL Associates, LLC

IMPOSITION OF CIVIL FINE AND
STOP PLACEMENT ORDER PROHIBITING ADMISSIONS

Dear Administrator:

On February 16, 2024, the Department of Social and Health Services (DSHS), Residential Care Services completed a Complaint Investigation at your facility. This letter constitutes formal notice of a civil fine and stop placement order prohibiting admissions for your assisted living facility, also known as **Cordata Court, Assisted Living & Memory Care,** located at **4415 Columbine Dr, Bellingham,** 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 fine 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 **February 16, 2024.**

Civil Fine

WAC 388-78A-2210(1)(b)(2) Medication services. **$1,000.00**

The licensee failed to ensure four residents received medications as prescribed and that doctors' orders were documented on the medication administration records (MAR). These failures resulted in one resident receiving a medication that had been discontinued for five months, another resident missing six consecutive doses of an antiseizure medication, a third resident receiving two extra doses of an antidepressant medication and being sent to the hospital, and another resident missing 72 doses of multiple medications over a three-month period and placed all residents at risk for medication errors and unsafe medication services.

This is an uncorrected and recurring deficiency for WAC 388-78A-2210(1)(b) previously cited on October 4, 2023, and January 10, 2024.

Stop Placement order prohibiting admissions.

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

The licensee failed to ensure four residents received medications as prescribed and that doctors' orders were documented on the medication administration records (MAR). These failures resulted in one resident receiving a medication that had been discontinued for five months, another resident missing six consecutive doses of an antiseizure medication, a third resident receiving two extra doses of an antidepressant medication and being sent to the hospital, and another resident missing 72 doses of multiple medications over a three-month period and placed all residents at risk for medication errors and unsafe medication services.

This is an uncorrected and recurring deficiency for WAC 388-78A-2210(1)(b) previously cited on October 4, 2023, and January 10, 2024.

The stop placement order prohibiting admissions to your assisted living facility is effective immediately upon **verbal** notice to you on **February 22, 2024,** 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 Kim Ripley, Field Manager, at (206) 794-8568.

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.

NOTE: These are the violations, which resulted in the fine and stop placement order prohibiting admissions; see the attached Statement of Deficiencies for any additional violations.

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:

Kim Ripley, Field Manager
Region 2, Unit A
3906 172nd St NE Suite 100
Arlington, WA 98223
Phone: (206) 794-8568 / Fax: (360) 651-6940
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.

Send your **written** request to:

Informal Dispute Resolution Program Manager
Residential Care Services
PO Box 45600
Olympia, Washington 98504-5600

Formal Administrative Hearing

You may contest the civil fine and stop placement order prohibiting admissions by requesting a formal administrative hearing to challenge the deficiencies, which resulted in the civil fine and stop placement order prohibiting admissions. **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 fine is due to the Office of Financial Recovery twenty-eight (28) calendar days after receipt of this letter.

Mail a check for **$1,000.00** 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, Washington 98507-9501
1-800-562-6114 (extension 45919)
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.

If you have any questions, please contact Kim Ripley, Field Manager, at (206) 794-8568.

Sincerely,

Matt Hauser
Compliance Specialist
Residential Care Services

Enclosure

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

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