



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

RED OAK MANAGEMENT AND DEVELOPMENT
RED OAK RESIDENCE OF NORTH BEND
650 E NORTH BEND WAY
NORTH BEND, WA 98045

RE: RED OAK RESIDENCE OF NORTH BEND License # 1158

Dear Administrator:

This letter addresses Compliance Determination(s) 51840 (Completion Date 12/17/2024) and 49384 (Completion Date 10/25/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 12/17/2024 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-2040-2

The Department staff who did the on-site verification:
Karri Hernandez, Community Complaint Investigator

If you have any questions, please contact me at (360)651-6846.

Sincerely,

Kimberley Ripley

Kimberley Ripley, Field Manager
Region 2, Unit D
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: RED OAK RESIDENCE OF NORTH BEND **Provider Type:** Assisted Living Facility

License/Cert.#: 1158

Intake ID: 151355

Compliance Determination #: 49384

Region/Unit #: RCS Region 2 / Unit D

Investigator: Karri Hernandez

Investigation Date(s): 10/24/2024 through 10/25/2024

Complainant Contact Date(s):

Allegation(s):

Failed Fire Marshall Inspection

Investigation Methods:

Sample:	Total residents: 11 Resident sample size: 0 Closed records sample size:
Observations:	Dining
Interviews:	Facility staff
Record Reviews:	State reporting log Fire Marshall Report

Investigation Summary:

Reviewed intake. Reviewed Washington State Patrol Fire Marshall, interviewed facility staff.

Review of document titled " Washington State Patrol Fire Protection Bureau", dated 10/03/2024, showed the facility failed a second Fire Marshal inspection. The document identified multiple fire safety violations. The document showed the facility failed to meet required fire safety regulations. Staff A, Administrative Assistant, stated that they were aware the facility was out of compliance with the State Fire Marshal regulations. Staff A stated that the facility staff and management created a plan to get back into compliance and were developed a plan to get back into compliance. Staff A stated that the facility scheduled with outside vendors to correct the outstanding Fire Marshall requirements.

Failed practice identified; Statement of Deficiency issued, Compliance Determination 49384 on 10/25/2024.

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 #. 1158	Compliance Determination # 49384
Plan of Correction	RED OAK RESIDENCE OF NORTH BEND	Completion Date
Page 1 of 2	Licensee: RED OAK MANAGEMENT AND DEVELOPMENT	10/25/2024

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 10/24/2024, 10/24/2024 and 10/24/2024 of:

RED OAK RESIDENCE OF NORTH BEND
 650 E NORTH BEND WAY
 NORTH BEND, WA 98045

This document references the following complaint number(s): 151355

The following sample was selected for review during the unannounced on-site visit: 0 of 11 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Karri Hernandez, Community Complaint Investigator

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

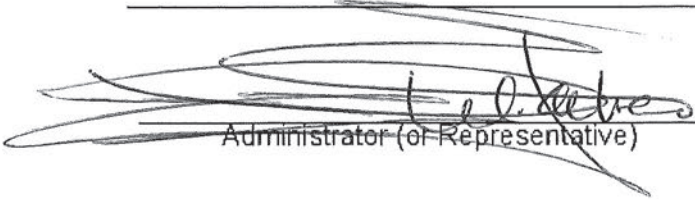
Residential Care Services

10/28/2024

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.

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


Administrator (or Representative)

10/31/2024
Date

WAC 388-78A-2040 Other requirements.

(2) The assisted living facility must have its building approved by the Washington state fire marshal in order to be licensed.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to ensure 11 of 11 residents (Resident 1 through Resident 11) resided in a safe environment that is approved of by the State Fire Marshal. This failure placed all 11 residents at risk of harm, injury, and potential fire hazards related to unsafe environmental conditions.

Findings included...

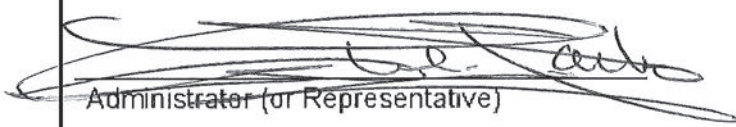
Review of the Washington State Patrol Fire Protection Bureau report, dated 10/03/2024, showed the facility failed the second Fire Marshal inspection. The document identified multiple fire safety violations. The document showed the facility failed to meet required fire safety regulations.

During an interview on 10/24/2024 at 12:15 PM, Staff A, Administrative Assistant, stated that they were aware the facility was out of compliance with the State Fire Marshal regulations. Staff A stated that the facility staff created a plan to get back into compliance, within the next forty-five days. Staff A stated that the facility was on the schedule from an outside vendor to come in to fix the deficiencies identified by the fire marshal. Staff A stated that facility staff and administration was working diligently to make the required repairs directed by the Fire Marshall.

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, RED OAK RESIDENCE OF NORTH BEND is or will be in compliance with this law and / or regulation on

(Date) 12/9/2024. ** we have been scheduled with an outside Agency to fix this, EARLIEST DATE IS Nov 13, 2024 - which is our Appointment*
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.


Administrator (or Representative)

10/31/2024
Date