



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

Hearthstone Community Healthcare, LLC
Hearthstone Senior Living
802 East Mountain View Ave
Ellensburg, WA 98926

RE: Hearthstone Senior Living # 2711

Dear Administrator:

This document references Compliance Determination 48866 (10/29/2024), which included complaint number(s) 151138, 150412, 149841.

The Department completed a complaint investigation of your Assisted Living Facility on 10/29/2024 and found that your facility does not meet the Assisted Living Facility requirements.

The department staff who did the inspection and provided consultation:

Felicia Cantu, Community Complaint Investigator

Consultation:

WAC 388-78A-2160 Implementation of negotiated service agreement. The assisted living facility must provide the care and services as agreed upon in the negotiated service agreement to each resident unless a deviation from the negotiated service agreement is mutually agreed upon between the assisted living facility and the resident or the resident's representative at the time the care or services are scheduled.

The facility failed to provide compression stocking assistance for the named resident as indicated in their negotiated service agreement(NSA). The facility added the task of compression stocking assistance for residents in their treatment administration record (TAR) for care staff to chart that all tasks were implemented per the resident's NSA.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:

- Inspect the facility to determine if you have corrected all deficiencies.

You May:

- Contact me for clarification of the deficiency or deficiencies found.

In Addition, You May:

- Request an **Informal Dispute Resolution (IDR)** review within 10 working days after you receive this letter. Your IDR request **must** include:
 - o What specific deficiency or deficiencies you disagree with;
 - o Why you disagree with each deficiency; and
 - o Whether you want an IDR to occur in-person, by telephone or as a paper review.
 - o Send your request to:

IDR Program Manager
Department of Social and Health Services
Aging and Long-Term Support Administration
Residential Care Services
PO Box 45600
Olympia, WA 98504-5600

If You Have Any Questions:

- Please contact me at (509)993-7821.

Sincerely,

Stephanie Jenks

Stephanie Jenks, Field Manager
Region 1, Unit G
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: Hearthstone Senior Living **Provider Type:** Assisted Living Facility

License/Cert.#: 2711

Intake ID: 149841

Compliance Determination #: 48866

Region/Unit #: RCS Region 1 / Unit G

Investigator: Felicia Cantu

Investigation Date(s): 10/17/2024 through 10/29/2024

Complainant Contact Date(s): 10/30/2024

Allegation(s):

- 1) Residents are not being toileted and changed by staff.
 - 2) Facility staff are not dressing and putting compression socks on a named resident.
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Investigation Methods:

Sample:	Total residents: 49 Resident sample size: 5 Closed records sample size:
Observations:	Identified resident Residents Resident care equipment Resident rooms Staff to resident interactions
Interviews:	Identified resident Residents Facility staff Others not associated with the facility
Record Reviews:	Characteristic roster House policies Treatment administration records(TAR) Resident records (face sheets, care plan, assessments, and chart notes.)

Investigation Summary:

1) Observations showed that facility staff were toileting residents. Residents in the facility were dressed and groomed. Interviews and record review showed that the facility staff documented that residents were toileted. No failed practice identified. 2) Observations showed that facility staff were toileting the named resident and other residents. Observations, interviews, and record review showed that the facility failed to provide compression stocking assistance for the named resident as indicated in their negotiated service agreement. The facility added the task of compression stocking assistance for residents in their treatment administration

record(TAR) for care staff to chart that all tasks are implemented per the resident's NSA.
Consultation written WAC 388-78A-2160.

Conclusion / Action:

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