STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave Ste 200, Vancouver, WA 98684

EMERITUS CORPORATION
Brookdale Olympia East
616 LILLY RD NE
OLYMPIA, WA 98506

RE: Brookdale Olympia East License # 2275

Dear Administrator:

This letter addresses Compliance Determination(s) 35714 (Completion Date 01/24/2024) and 27935 (Completion Date 08/10/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 01/24/2024 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-2100, WAC 388-78A-2100-2, WAC 388-78A-2100-2-a, WAC 388-78A-2100-2-b

The Department staff who did the on-site verification:
Paul Aube, ALF NCI
Pamela Horlick, NCI RN Complaint Investigator

If you have any questions, please contact me at (253)254-3190.

Sincerely,

Cory Cisneros

Cory Cisneros, Field Manager
Region 3, Unit E
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: Brookdale Olympia East
Provider Type: Assisted Living Facility
License/Cert.#: 2275
Compliance Determination #: 27935
Intake ID: 91724
Investigator: Paul Aube
Region/Unit #: RCS Region 3 / Unit E
Investigation Date(s): 08/10/2023 through 08/10/2023
Complainant Contact Date(s):

Allegation(s):

1. Quality of Care/Treatment: Public report of the facility not providing assistance to residents during mealtimes.
2. Dietary Services: Public report of facility not following physician orders to properly prepare altered diets for residents.

Investigation Methods:

Sample:
Total residents: 66
Resident sample size: 4
Closed records sample size: 2

Observations:
Residents
Dining
Resident rooms
Staff to resident interactions
Resident to resident interactions
Kitchen
Food preparation

Interviews:
Nursing staff
Residents
Family members
Kitchen staff

Record Reviews:
Medical records
Disclosure of Services
Physician Orders
Nursing Assessments
Care Plans
Progress Notes

Investigation Summary:

1. Quality of Care/Treatment: Facility failed to update a nursing assessment for residents who experience a change in condition and required staff assistance with feeding. Facility failed to update care plan resulting in staff unaware of resident changes in condition.
2. Dietary Services: Facility prepared residents tray accordingly per dietary manual.

Unable to substantiate failed practice.

Conclusion / Action:

- [x] 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 #: 2275	Compliance Determination # 27935
Plan of Correction	Brookdale Olympia East	Completion Date
Page 1 of 4	Licensee: EMERITUS CORPORATION	08/10/2023

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 08/10/2023 and 08/10/2023 of.

Brookdale Olympia East
616 LILLY RD NE
OLYMPIA, WA 98506

This document references the following complaint number(s): 91724

The following sample was selected for review during the unannounced on-site visit: 4 of 66 current residents and 2 former residents.

The department staff that investigated the Assisted Living Facility:

Paul Aube, ALF NCI
Pamela Horlick, NCI RN Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit E
800 NE 136th Ave Ste 200
Vancouver, WA 98684

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AGING AND LONG-TERM SUPPORT ADMINISTRATION

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616 LILLY RD NE
OLYMPIA, WA 98506

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From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit E
800 NE 136th Ave Ste 200
Vancouver, WA 98684

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.

Residential Care Services

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.

Statement of Deficiencies	License #. 2275	Compliance Determination # 27935
Plan of Correction	Brookdale Olympia East	Completion Date
Page 2 of 4	Licensee: EMERITUS CORPORATION	08/10/2023

Administrator (or Representative) Date 08/16/2023

WAC 388-78A-2100 On-going assessments. The assisted living facility must:

(2) Complete an assessment specifically focused on a resident's identified problems and related issues:

(a) Consistent with the resident's change of condition as specified in WAC 388-78A-2120 ;

(b) When the resident's negotiated service agreement no longer addresses the resident's current needs and preferences:

This requirement was not met as evidenced by:

Based on record review and interview, the facility failed to complete an updated nursing assessment when they discovered the resident had a significant decline in condition for 2 of 4 sample residents, (Resident 1 [R1], and Resident 2 [R2]) reviewed. This failure placed R1, R2, and all other residents who experience a decline of condition at risk for unmet care needs by staff.

Findings included.

Review of the facility's Disclosure of Services, last reviewed 02/2007, under the "Eating" category, stated that the facility provided services to feed residents, on a routine basis, if they were unable to feed themselves. "We can feed you, if you need temporary assistance for up to 14 days." "If you are on hospice care, or residing in a memory care neighborhood, there is no time restriction."

According to the American Cancer Society document, titled, "Hospice Care," last reviewed 05/10/2019, stated, 'Hospice care is a special kind of care that focuses on the quality of life for people who are experiencing an advanced, life-limiting illness and their caregivers. Hospice care provides compassionate care for people in the last phases of incurable disease so that they may live as fully and comfortably as possible."

Administrator (or Representative) Date

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Review of the St George University Hospitals document, titled, "Guidelines for Patients Requiring One to One Observation," last reviewed 11/2016, stated, "One to one nursing or continuous observation are terms used for a registered nurse or health care support worker whose role it is to provide one to one nursing or observation care to an individual patient for a period of time."

Review of R1's face sheet shows that R1 was admitted to the facility on [redacted]/2016.

Review of R1's Active Physician Orders, under the "Dietary" section showed "Regular liquids consistency, resident is a one to one (1:1) feeding for adequate nutritional intake." This order was shown to have a start date on 06/06/2023.

Review of R1's most recent Negotiated Service Agreement, last reviewed on 10/19/2022, under the 'Nutrition" category, showed that R1 was able to eat food at times without help, but staff were to cut up [R1's] food and assist them with eating. There was no mention of a one-to-one staff assist with feeding.

Review of R1's most recent Nursing Assessment, last reviewed on 10/19/2022, under the "Nutrition" category, showed that R1 was able to eat food at times without help, but staff were to cut up [R1's] food and assist them with eating. There was no mention of a one-to-one staff assist with feeding. There was no mention of a one-to-one staff assist with feeding.

Record review of R1's medical record, dated 10/19/2022 – 06/06/2023, showed there was no documented licensed nurse assessments related to change of condition of R1's inability to feed herself, and requirement of staff assistance.

Review of R2's face sheet shows that R1 was admitted to the facility on [redacted]/2018.

Review of R2's Active Physician Orders, under the "Dietary" section, showed "Regular liquids consistency, Cut food up in the kitchen. No meat or chewy foods. Instead provide [R2] with cottage cheese, yogurt, scrambled eggs, or grilled cheese sandwich." "1:1 feeding for proper nutritional intake during meals." This order was shown to have a start date on 04/21/2023.

Review of R2's most recent Negotiated Service Agreement, last reviewed on 10/19/2022, under the "Nutrition" category, showed that R2 was able to eat food at times without help, but staff were to cut up R2's food and assist them with eating. There was no mention of a one-to-one staff assist with feeding.

Review of R2's Nursing Assessment, last reviewed on 10/19/2022, showed that staff were to provide finger foods, and verbal prompts to encourage R2 to eat. "[R2] is able to eat food at times

Review of R1's Active Physician Orders, under the "Dietary" section showed "Regular liquids consistency, resident is a one to one (1:1) feeding for adequate nutritional intake." This order was shown to have a start date on 06/06/2023.

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Record review of R1's medical record, dated 10/19/2022 – 06/06/2023, showed there was no documented licensed nurse assessments related to change of condition of R1's inability to feed herself, and requirement of staff assistance.

Review of R2's face sheet shows that R1 was admitted to the facility on [redacted]/2018.

Review of R2's Active Physician Orders, under the "Dietary" section, showed "Regular liquids consistency, Cut food up in the kitchen. No meat or chewy foods. Instead provide [R2] with cottage cheese, yogurt, scrambled eggs, or grilled cheese sandwich." "1:1 feeding for proper nutritional intake during meals." This order was shown to have a start date on 04/21/2023.

Review of R2's most recent Negotiated Service Agreement, last reviewed on 10/19/2022, under the "Nutrition" category, showed that R2 was able to eat food at times without help, but staff were to cut up R2's food and assist them with eating. There was no mention of a one-to-one staff assist with feeding.

Review of R2's Nursing Assessment, last reviewed on 10/19/2022, showed that staff were to provide finger foods, and verbal prompts to encourage R2 to eat. "[R2] is able to eat food at times without help, but staff at times will need to cut up [R2's] food and assist [R2] with feeding." There was no mention of a one-to-one staff assist with feeding.

Record review of R2's medical record, dated 10/19/2022 – 04/21/2023, showed there was no documented licensed nurse assessments related to change of condition of R2's inability to feed herself, and requirement of staff assistance.

During an interview with Staff B, a caregiver, on 08/10/2023 at 11:07AM, when asked if

there were residents who needed assistance with feeding, she stated, "Yes [R1], and [R2] Sometimes for [R2] we try and give [them] handheld foods, but we like to make sure [they] can do it before leaving the room." "We always try and go back and check and make sure [they] [are] eating."

During an interview with Staff A, the Health and Wellness Director, on 08/10/2023 at 1:57PM, when asked when a resident would need a new nursing assessment, Staff A stated that a new assessment was done prior to resident admit, and on admission. Staff A stated that another one would be done within two-weeks, and also new ones were completed with resident "changes of condition." Staff A was asked if they would classify a resident decline in condition where they were unable to feed themselves and required one to one staff assist as a "change in condition." Staff A stated, "Yes, it is." When asked why these were not done, Staff A stated, "I don't know, it should have been."

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, Brookdale Olympia East is or will be in compliance with this law and / or regulation on (Date) 09/15/2023.

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

Administrator (or Representative) [signature] Date 08/10/2023

there were residents who needed assistance with feeding, she stated, “Yes [R1], and [R2]. Sometimes for [R2] we try and give [them] handheld foods, but we like to make sure [they] can do it before leaving the room.” “We always try and go back and check and make sure [they] [are] eating.”

During an interview with Staff A, the Health and Wellness Director, on 08/10/2023 at 1:57PM, when asked when a resident would need a new nursing assessment, Staff A stated that a new assessment was done prior to resident admit, and on admission. Staff A stated that another one would be done within two-weeks, and also new ones were completed with resident “changes of condition.” Staff A was asked if they would classify a resident decline in condition where they were unable to feed themselves and required one to one staff assist as a “change in condition.” Staff A stated, “Yes, it is.” When asked why these were not done, Staff A stated, “I don’t know, it should have been.”

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