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

11/07/2025

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

RE: Brookdale Olympia East # 2275

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 68394 (Completion Date 11/07/2025) and 62910 (Completion Date 09/11/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 11/07/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 388-78A-2371 Investigations. The assisted living facility must:

(1) Investigate and document investigative actions and findings for any alleged or suspected abuse, neglect, or financial exploitation; or accident or incident jeopardizing or affecting a resident health or life;

(2) Determine the circumstances of the event;

(3) When necessary, institute and document appropriate measures to prevent similar future situations if the alleged incident is substantiated; and

(4) Protect residents during the course of the investigation.

The Department staff who did the On Site verification:
Pamela Horlick, NCI RN Complaint Investigator

If you have any questions, please contact me at (253)442-3013.

Sincerely, Laurie Anderson

Laurie Anderson, Community 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
Intake ID: 185498
Compliance Determination #: 62910
Region/Unit #: RCS Region 3 / Unit E
Investigator: Pamela Horlick
Investigation Date(s): 07/22/2025 through 09/11/2025
Complainant Contact Date(s):

Allegation(s):
Misappropriation of Property: Facility report of a resident missing money from their apartment.

Investigation Methods:

Sample:
Total residents: 66
Resident sample size: 4
Closed records sample size: 0

Observations:
Identified resident
Residents
Activities
Resident rooms
Staff to resident interactions
Resident to resident interactions
Medication administration

Interviews:
Identified resident
Nursing staff
Residents

Record Reviews:
State reporting log
Grievance log
Incident investigation
Facility policies
Flyer (notifying of thefts)
Face Sheets
Police notification
Progress Notes
Staff List

Investigation Summary:
Misappropriation of Property: Facility failed to do an investigation after a resident reported that they were missing money. Failed practice identified.

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 # 62910
Plan of Correction	Brookdale Olympia East	Completion Date
Page 1 of 4	Licensee: EMERITUS CORPORATION	09/11/2025

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 07/22/2025 of:

Brookdale Olympia East
616 LILLY RD NE
OLYMPIA, WA 98506

This document references the following complaint number(s): 185498, 186657

The following sample was selected for review during the unannounced on-site visit: 4 of 66 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

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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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.

Clinton Fridley
Residential Care Services

09/23/2025
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.

Bob Cb
Administrator (or Representative)

10/3/2025
Date

WAC 388-78A-2371 Investigations. The assisted living facility must:

(1) Investigate and document investigative actions and findings for any alleged or suspected abuse, neglect, or financial exploitation; or accident or incident jeopardizing or affecting a resident health or life;

(2) Determine the circumstances of the event;

(3) When necessary, institute and document appropriate measures to prevent similar future situations if the alleged incident is substantiated; and

(4) Protect residents during the course of the investigation.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to investigate and document investigative actions and findings for an incident for 1 of 3 residents (Resident 1 [R1]). This failure placed R1 at risk for unmet care needs.

Findings included...

Record review of the facility policy titled, "Abuse, Neglect and Exploitation Policy," revised 05/2021, documented staff are to report immediately to the executive director or manager on duty, and to the Department hotline, when they have reasonable cause to believe a resident has been exploited and managers are required to take necessary steps to protect residents and should initiate an investigation as soon as possible.

Record review of R1's face sheet showed that R1 was admitted to the facility on [redacted]/2023.

In an interview on 07/22/2025 at 1:37PM, R1 was asked if they feel safe living at the community, they stated no, they have had money stolen from them on the fourth of July while they were at bingo. R1 stated they told Staff A. R1 stated Staff A took notes and stated they were going to look into it. R1 stated they haven't talked to Staff A since.

In an interview on 07/22/2025 1:47PM, Staff D stated that R1 mentioned to them that someone stole money out of their purse. Staff D stated they asked R1 if they reported it to Staff A and R1 stated they had. Staff D was asked if they reported it to anyone and they stated they had reported it to Staff B. Staff D stated that Staff B stated they had already known about it.

In an interview on 07/22/2025 at 2:06PM, R1 was asked if they recall when they talked to Staff A, they stated it was this month. R1 stated the money went missing on fourth of July. R1 was asked if they told any other staff, they stated they did.

In an interview on 07/22/2025 at 2:41 PM, Staff A was asked if they were informed that R1 was missing money, they stated they were not.

In an interview on 07/22/2025 at 2:41 PM, Staff B was asked if they were aware of R1 missing money, they stated they were not.

In an interview on 07/22/2025 at 3:14 PM, Staff E, medication technician, was asked if they were aware of anyone missing anything, they stated R1. Staff E stated R1 told them and Staff F, caregiver, that someone stole money from them. Staff E stated they filled out a grievance form. Staff E stated they left the form at the medication cart and Staff G turned it in. Staff E stated they filled it out on July 8th and it was confirmed by Staff A that they had received it on July 9th.

In an interview on 07/22/2025 at 3:30 PM, Staff F was asked if they were aware of anyone missing anything, they stated R1 was. Staff F stated R1 told them they were missing money. Staff F stated they reported it to Staff E and they filled out a grievance form. Staff F was asked if they remember when they were told about the missing money, they stated July 8th.

In an interview on 07/30/2025 11:38 AM, Staff G, medication technician/caregiver, was asked if they recall R1 missing anything, they stated yes that R1 had notified Staff E and Staff E filled out a grievance form. Staff G stated they slid it under staff C's door.

In an interview on 07/30/2025 at 1:49 PM, Staff C, Health and Wellness Director, was asked if they received a grievance form for R1, they stated they did not recall seeing anything and was not aware of R1 missing anything.

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Page 4 of 4	Licensee: EMERITUS CORPORATION	09/11/2025

This is a recurring deficiency previously cited on 07/25/2023 and 11/02/2022.

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) 10/26/2025 .

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

Administrator (or Representative) — Date: 10/3/25