



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

March 19, 2024

ELECTRONIC-FACSIMILE

Administrator
Brookdale Olympia West
420 Yauger Way SW
Olympia, WA 98502-8660

Assisted Living Facility License #**2497**
Licensee: BKD Clare Bridge of Olympia LLC

IMPOSITION OF CIVIL FINES

Dear Administrator:

On March 6, 2024, the Department of Social and Health Services (DSHS), Residential Care Services completed a follow-up visit at your facility. This letter constitutes formal notice of civil fines on the license for your assisted living facility, also known as **Brookdale Olympia West**, located at **420 Yauger Way SW, Olympia**, 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.

The civil fines on the license are based on the following violation of the RCW and/or WAC as described in the attached Statement of Deficiencies (SOD) report dated March 6, 2024.

Civil Fines

WAC 388-78A-2320(1)(b)(3)(c) Intermittent nursing services systems. **\$500.00**

The licensee failed to ensure staff had the required nurse delegation training, supervision, and documentation by the Registered Nurse (RN) Delegator for four residents receiving nurse delegated services. The facility failed to verify six staff members credentials and trainings for qualification prior to administering nurse delegated tasks. The facility failed to ensure that qualified medication technicians administered nurse delegated services and tasks to four residents. These failures resulted in residents receiving medication services from unqualified, untrained, and unsupervised staff, and placed all residents receiving RN delegated services at risk for harm and injury due to untrained, unqualified, and unsupervised care staff.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-3100(1)(3)(4) Safe storage of supplies and equipment. **\$400.00**

The licensee failed to secure potentially hazardous supplies accessible to memory care and assisted living residents for two locations within the facility. This failure resulted in potentially hazardous supplies being accessible to residents and placed all 47 residents at risk for ingesting potentially toxic materials.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-2620(2)(a)(b) Pets. **\$200.00**

The licensee failed to ensure two pets and all other pets living on the premises had regular examinations and were certified by a veterinarian to be free of disease transmittable to humans. This failure placed 47 residents, all staff, and visitors at risk of being exposed to diseases which could impact their health.

This is an uncorrected deficiency previously cited on December 14, 2023.

**WAC 388-78A-2471(1)(4) Background check—Confidentiality—
Use restricted—Retention.** **\$400.00**

The licensee failed to ensure three staff had a copy of their Washington State (WA) Name and Date of Birth and Fingerprint Background Checks at the facility for the department to review and failed to maintain background check forms, results, and authorizations on-site in a confidential and secure manner. These failures to ensure Washington State Background Checks were available and that the background check information was maintained in a confidential manner placed 47 residents at risk for being cared for by a staff member with a potentially disqualifying history and placed all staff at risk for having confidential information exposed.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-2450(2)(b) Staff. **\$200.00**

The licensee failed to complete reference checks for three employees reviewed. This failure placed all 47 residents at risk of receiving care and services from unqualified and/or unsuitable staff.

This is an uncorrected deficiency previously cited on December 14, 2023.

**WAC 388-78A-2474(2)(a)(c)(d) Training and home care aide
certification requirements.** **\$400.00**

The licensee failed to ensure two staff had the required CPR (cardiopulmonary resuscitation) and First Aid training and failed to ensure three staff had completed their

facility orientation training. These failures resulted in residents being cared for by staff without orientation training, and CPR/First Aide training, and placed 47 residents at risk of harm in the event of an emergency due to staff not being trained on life saving measures and staff being unaware of the facility's expectations.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-2150(1)(2) Signing negotiated service agreement. **\$200.00**

The licensee failed to ensure the Resident Service Plans (Negotiated Service Agreements) for one resident was agreed to and signed at least annually by the resident, resident's representative, and representative of the assisted living facility. This failure placed the resident and their responsible party at risk for not being involved in or agreeing to their care decisions and the services being provided.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-2480(1)(2) Tuberculosis—Testing—Required. **\$200.00**

The licensee failed to develop and implement a system to ensure two staff were screened for tuberculosis (TB, a communicable disease) within three days of employment as required. This failure placed all 47 residents and staff at risk of TB infection.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-2040(1) Other requirements. **\$500.00**

The licensee failed to maintain a respiratory protection program to ensure all staff had required annual medical evaluations and were fit tested for an N95 respirator (a device worn over the mouth and nose or entire face that prevents inhalation of dust, smoke, and other substances) for five staff reviewed. The facility failed to ensure that all fire extinguishers had service tags that showed when they were serviced yearly and checked monthly. These failures placed all 47 residents, staff, and visitors at risk for spread of infectious disease and at risk of harm during a fire.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-3040(2)(b)(c) Laundry. **\$400.00**

The licensee failed to ensure two laundry rooms (Bridge and Clare unit laundry rooms) implemented infection control practices to keep clean and soiled laundry separated. This failure resulted in 47 residents not having infection control practices in place for proper handling and prevention of cross contamination for all laundry services.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-2305(1)(2) Food sanitation.

\$400.00

The licensee failed to ensure food was stored and labeled properly for three kitchen areas reviewed (Bride Side Kitchenette, Clare Side Kitchenette, and Main kitchen). The facility failed to ensure proper hand hygiene and infection control practices were conducted for one cook in between tasks in the kitchen. These failures placed all 47 residents at risk for exposure to food-borne illnesses and at risk for receiving food that was incorrectly stored and prepared.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-2710(2) Disclosure of services.

\$400.00

The licensee failed to provide housekeeping and resident care needs and services as written on their personal services plan for four residents. This failure placed all 47 residents at risk for unmet care needs and decreased quality of life.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-2610(1)(2)(c) Infection control.

\$500.00

The licensee failed to provide necessary handwashing supplies in two memory care buildings (Bridge and Clare) for staff and residents to use. Additionally, the licensee failed to implement proper infection control hand washing measures when job tasks were changed for one observed kitchen staff. These failures resulted in a break in the hand hygiene practices, staff not having access to hand hygiene supplies, and placed all 47 residents at risk for the spread of infectious disease.

This is an uncorrected deficiency previously cited on December 14, 2023, and August 12, 2021, for subsection (1).

WAC 388-78A-3060(3) Storage space.

\$300.00

The licensee failed to maintain five linen closets in a safe and sanitary manor. This failure placed 47 residents and all staff members at risk for fire or safety hazards.

This is an uncorrected deficiency previously cited on December 14, 2023.

WAC 388-78A-3090(1)(a)(b)(c)(d) Maintenance and housekeeping.

\$500.00

The licensee failed to provide a safe, sanitary, and well-maintained environment for six areas within the building. The facility failed to keep exterior grounds in good repair, equipment, and furnishings clean. These failures resulted in an unmaintained environment for residents and staff and placed 47 residents at risk for a diminished

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quality of life due to unsafe, unsanitary, and unmaintained living conditions for all residents.

This is an uncorrected and recurring deficiency previously cited on December 14, 2023, and July 13, 2021, for subsections (1)(a).

RCW 70.129.060(1)(2) Grievances.

\$400.00

The licensee failed to promptly address and resolve grievances for two residents and their representatives. This failure resulted in unresolved grievance for residents and their representatives and placed all 47 residents at risk for a decreased quality of life.

This is an uncorrected deficiency previously cited on December 14, 2023.

NOTE: These are the violations, which resulted in the fines; 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:

Cory Cisneros, Field Manager
Region 3, Unit E
6639 Capitol Blvd SW Point Plaza West
Tumwater, WA 98501
Phone: (253) 254-3190 / Fax: (360) 664-8451
rcsregion3email@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]

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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 fines by requesting a formal administrative hearing to challenge the deficiency, which resulted in the civil fines. **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 fines are due to the Office of Financial Recovery twenty-eight (28) calendar days after receipt of this letter.

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Mail a check for **\$5,900.00** 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 Cory Cisneros, Field Manager, at (253) 254-3190.

Sincerely,



Matt Hauser
Compliance Specialist
Residential Care Services

Enclosure

cc: Field Manager, Region 3, Unit E
RCS Regional Administrator, Region 3
HCS Regional Administrator, Region 3
DDA Regional Administrator, Region 3
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
HQ Central Files
DRW
HP