STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

04/30/2025

Bremerton SCC LLC
The Arbor at Bremerton
3510 9th Street
Bremerton, WA 98312

RE: The Arbor at Bremerton # 2619

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 58779 (Completion Date 04/30/2025) and 54035 (Completion Date 03/13/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 04/30/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2080 Qualified assessor. The assisted living facility must ensure the person responsible for completing a preadmission assessment of a prospective resident:

(1) Has a master's degree in social services, human services, behavioral sciences or an allied field and two years social service experience working with adults who have functional or cognitive disabilities; or

(2) Has a bachelor's degree in social services, human services, behavioral sciences, or an allied field and three years social service experience working with adults who have functional or cognitive disabilities; or

(3) Has a valid Washington state license to practice nursing, in accordance with chapters 18.79 RCW and 246-840 WAC; or

(4) Is a physician with a valid state license to practice medicine; or

(5) Has three years of successful experience acquired prior to September 1, 2004, assessing prospective and current assisted living facility residents in a setting licensed by a state agency for the care of vulnerable adults, such as a nursing home, assisted living facility, or adult family home, or a setting having a contract with a recognized social service agency for the provision of care to vulnerable adults, such as supported living.

WAC 388-78A-2210 Medication services.

(1) An assisted living facility providing medication service, either directly or indirectly, must:

(b) Develop and implement systems that support and promote safe medication service for each resident.

The Department staff who did the On Site verification:
Michael Goulet, Complaint Investigator

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

Sincerely,

Manfay Chan, Allied Health Field Manager
Region 3, Unit D
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: The Arbor at Bremerton
Provider Type: Assisted Living Facility

License/Cert.#: 2619
Intake ID: 163458
Compliance Determination #: 54035
Region/Unit #: RCS Region 3 / Unit D
Investigator: Michael Goulet
Investigation Date(s): 01/30/2025 through 03/13/2025
Complainant Contact Date(s):

Allegation(s):

1) No dietary manager
2) Refrigerators not checked for temperature
3) Residents admitted without care plan
4) No qualified assessor evaluating residents on admission
5) Rotten food in kitchen fed to residents
6) Kitchen dirty

Investigation Methods:

Sample:	Total residents: 37 Resident sample size: 37 Closed records sample size: 1
Observations:	General environment Resident Condition Residents in their rooms Kitchen/servery (food, refrigerator temperatures)
Interviews:	Residents Staff
Record Reviews:	Resident assessment records (37) Dietary manual

Investigation Summary:

1) Per staff interview, the facility does have a dietary manager, although per record review of the pertinent regulations the facility is only required to have a dietary manual written by a dietician, which was also observed to be present in the facility.
2) Per observation of the facility kitchen, refrigerator and freezer temperature logs were posted and up to date. Per observation of temperatures on multiple kitchen inspections, the refrigerators and freezer were at required temperatures.
3) As residents are not necessarily admitted with a prior care plan, this is not a requirement. The facility is required to perform an initial and 30 day assessment in order to determine the residents' care needs, but there is no requirement for a resident to have a care plan in place prior to admission.
4) While the facility was noted to have a qualified assessor (licensed nurse) on staff,

record review of multiple residents' (37) assessment records did show that several admission assessments (5) had been performed by staff who were not qualified to assess residents' needs. This issue was cited as per WAC 388-78A-2080 Qualified Assessor.
5,6) Per multiple observations of the facility kitchen there were no issues noted related to cleanliness or food condition, and there was no indication of any rotten food either in the kitchen or servery areas, or that any such food was served to residents.
Cited as per #4 above.

Conclusion / Action:

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

Residential Care Services
Investigation Summary Report

Provider/Facility: The Arbor at Bremerton
Provider Type: Assisted Living Facility

License/Cert.#: 2619
Intake ID: 167053
Compliance Determination #: 54035
Region/Unit #: RCS Region 3 / Unit D
Investigator: Michael Goulet
Investigation Date(s): 01/30/2025 through 03/13/2025
Complainant Contact Date(s): 02/19/2025, 03/13/2025

Allegation(s):

1) Facility med tech stated to complainant that there had been no med tech on duty on the night/ morning that the named resident passed away (2/10/25), leading to the resident not being administered medication during this time.

Investigation Methods:

Sample:	Total residents: 37 Resident sample size: 37 Closed records sample size: 1
Observations:	General environment
Interviews:	Staff
Record Reviews:	Medication Administration Record Narcotics Log Staff Time Card records Facility Staffing Schedule

Investigation Summary:

1) Per interview, the facility med tech who was stated by the complainant as admitting to there not being a med tech on duty the night the named resident passed denied having made any such statement. Per facility director interview, the med tech on duty that morning (2/10/25) at the facility's sister facility next door (Arbor Assisted Living) did cover the named resident's medication pass at 2:00am. This was recorded in the narcotics logbook, but was not recorded in the medication administration record as the med tech administering the medications did not have access to this facility's computer system. Per record review of the medication administration record (MAR), it was noted that the medications administered (Lorazepam, Oxycodone) to the named resident at 2:00am were signed off as 'out of parameters' (which would mean they were not administered) by the oncoming day shift med tech (the same med tech referred to by the complainant). Record review of the facility staff timecard records showed that this med tech was not on duty until approximately 6:00am on 2/10/25. The facility failed to ensure that the med tech covering for the named resident's medications was able to notate the

administration of these medications in the facility MAR, leading to the notation of the medication administration as being 'out of parameters' by a med tech who was not in the facility at the time of the actual administration. While no missed administration of medication or harm was substantiated, this failure to note the actuality of the resident's medication administration had the potential to lead to significant harm for the resident.
Cited as per WAC 388-78A-2210 (1b) Medication Services

Conclusion / Action:

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

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

PO Box 99250, Lakewood, WA 98496

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 01/30/2025 and 03/06/2025 of:

The Arbor at Bremerton
3510 9th Street
Bremerton, WA 98312

This document references the following complaint number(s): 163458, 163978, 164046, 164215, 167053

The following sample was selected for review during the unannounced on-site visit: 37 of 37 current residents and 1 former residents.

The department staff that investigated the Assisted Living Facility:

Michael Goulet, Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit D
PO Box 99250
Lakewood, WA 98496

Statement of Deficiencies	License #: 2019	Compliance Determination # 54035
Plan of Correction	The Arbor at Bremerton	Completion Date
Page 2 of 4	Licensee: Bremerton SCC LLC	03/13/2025

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

03/18/2025
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.

Administrator (or Representative)

3/20/25
Date

WAC 388-78A-2080 Qualified assessor. The assisted living facility must ensure the person responsible for completing a preadmission assessment of a prospective resident:

(1) Has a master's degree in social services, human services, behavioral sciences or an allied field and two years social service experience working with adults who have functional or cognitive disabilities; or

(2) Has a bachelor's degree in social services, human services, behavioral sciences, or an allied field and three years social service experience working with adults who have functional or cognitive disabilities; or

(3) Has a valid Washington state license to practice nursing, in accordance with chapters 18.79 RCW and 246-840 WAC; or

(4) Is a physician with a valid state license to practice medicine; or

(5) Has three years of successful experience acquired prior to September 1, 2004, assessing prospective and current assisted living facility residents in a setting licensed by a state agency for the care of vulnerable adults, such as a nursing home, assisted living facility, or adult family home, or a setting having a contract with a recognized social service agency for the provision of care to vulnerable adults, such as supported living.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure that resident assessments were performed by a qualified assessor for 4 of 6 sampled residents (Residents 3, 4, 5, & 6 [R3, 4, 5, & 6]). This failure placed these residents at risk of not having their needs adequately met and addressed by the facility staff.

Findings included...

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: 03/18/2025

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.

Administrator (or Representative) — Date

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Findings included...

Statement of Deficiencies	License #: 2619	Compliance Determination # 54035
Plan of Correction	The Arbor at Bremerton	Completion Date
Page 3 of 4	Licensee: Bremerton SCC LLC	03/13/2025

Record review on 03/07/2025 at 3:05pm of the Assessment History Records for all facility residents showed that four facility residents (R3 ,4, 5, & 6) had their initial admission assessments provided by Staff A, Executive Director.

During an interview on 03/12/2025 at 1:20pm, Staff A stated that they had initially been directed by senior management staff to provide assessments for residents on admission to the facility, but that later they (Staff A) were informed by Staff D, the facility's parent company's regional licensed nurse, that they were not qualified to perform resident assessments, and to discontinue assessments for residents.

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, The Arbor at Bremerton is or will be in compliance with this law and / or regulation on (Date) 4/1/25.

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

Administrator (or Representative) 3/20/25 Date

WAC 388-78A-2210 Medication services.

(1) An assisted living facility providing medication service, either directly or indirectly, must:

(b) Develop and implement systems that support and promote safe medication service for each resident.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure facility medication technician (med tech) staff were able to accurately document medication administration for 1 of 6 facility residents (Resident1 [R1]). This failure placed Resident 1 at risk of not receiving adequate or safe administration of medications as the resident's administration of narcotic medications was not able to be accurately noted in the facility medication administration system.

Findings included...

Record review on 02/19/2025 at 2:00pm of the February 2025 Medication Administration Record (MAR) for Resident 1 showed that Staff B, facility Med Tech, had noted the administration of narcotic medications (Oxycodone, pain medication, and

Record review on 03/07/2025 at 3:05pm of the Assessment History Records for all facility residents showed that four facility residents (R3 ,4, 5, & 6) had their initial admission assessments provided by Staff A, Executive Director.

During an interview on 03/12/2025 at 1:20pm, Staff A stated that they had initially been directed by senior management staff to provide assessments for residents on admission to the facility, but that later they (Staff A) were informed by Staff D, the facility's parent company's regional licensed nurse, that they were not qualified to perform resident assessments, and to discontinue assessments for residents.

Plan/Attestation Statement

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_____ _____

Administrator (or Representative) Date

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This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure facility medication technician (med tech) staff were able to accurately document medication administration for 1 of 6 facility residents (Resident1 [R1]). This failure placed Resident 1 at risk of not receiving adequate or safe administration of medications as the resident's administration of narcotic medications was not able to be accurately noted in the facility medication administration system.

Findings included...

Record review on 02/19/2025 at 2:00pm of the February 2025 Medication Administration Record (MAR) for Resident 1 showed that Staff B, facility Med Tech, had noted the administration of narcotic medications (Oxycodone, pain medication, and

Lorazepam, anti-anxiety medication) scheduled to be given at 2:00am on 02/10/2025 as 'out of parameters,' meaning the medications were not administered.

Record review on 03/12/2025 at 2:30pm of facility timecard logs for February 2025 showed that Staff B was not at the facility until 6:07am on 02/10/2025.

During an interview on 03/06/2025 at 11:20am, Staff A, facility Executive Director, stated that Staff C, Med Tech, from the facility's sister facility next door (Arbor Assisted Living) had actually administered the scheduled medications to R1 at 2:00am on 02/10/2025, but Staff C was not able to enter the documentation of this administration into the facility Medication Administration Record (MAR) due to not having access to the facility's computer system. Staff A stated that because of Staff C's lack of access to the computer-based MAR, that Staff B had entered the information into the system when they arrived at the facility later that morning (approximately 6:00am on 02/10/2025) but that this administration was entered as 'out of parameters' due to the time lapse between the times of administration and data entry, making it appear that the medication was not actually administered.

During an interview on 03/12/2025 at 4:05pm, Staff C stated that they had administered the scheduled narcotic medication (Oxycodone, Lorazepam) to R1 at 2:00am on 02/10/2025, but that they were not able to note the administration in the facility medication administration record due to not having access to the facility's computer-based medication administration record system.

Plan/Attestation Statement

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

Administrator (or Representative) Date 3/20/25

Lorazepam, anti-anxiety medication) scheduled to be given at 2:00am on 02/10/2025 as 'out of parameters,' meaning the medications were not administered.

Record review on 03/12/2025 at 2:30pm of facility timecard logs for February 2025 showed that Staff B was not at the facility until 6:07am on 02/10/2025.

During an Interview on 03/06/2025 at 11:20am, Staff A, facility Executive Director, stated that Staff C, Med Tech, from the facility's sister facility next door (Arbor Assisted Living) had actually administered the scheduled medications to R1 at 2:00am on 02/10/2025, but Staff C was not able to enter the documentation of this administration into the facility Medication Administration Record (MAR) due to not having access to the facility's computer system. Staff A stated that because of Staff C's lack of access to the computer-based MAR, that Staff B had entered the information into the system when they arrived at the facility later that morning (approximately 6:00am on 02/10/2025) but that this administration was entered as 'out of parameters' due to the time lapse between the times of administration and data entry, making it appear that the medication was not actually administered.

During an Interview on 03/12/2025 at 4:05pm, Staff C stated that they had administered the scheduled narcotic medication (Oxycodone, Lorazepam) to R1 at 2:00am on 02/10/2025, but that they were not able to note the administration in the facility medication administration record due to not having access to the facility's computer-based medication administration record system.

Plan/Attestation Statement

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_____ _____

Administrator (or Representative) Date