



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

ST. ANDREWS RETIREMENT COMMUNITY
ST ANDREWS PLACE ASSISTED LIVING
520 EAST PARK AVE
PORT ANGELES, WA 98362

RE: ST ANDREWS PLACE ASSISTED LIVING License # 1195

Dear Administrator:

This letter addresses Compliance Determination(s) 47056 (Completion Date 09/12/2024) and 44799 (Completion Date 07/29/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/12/2024 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-2600, WAC 388-78A-2600-2, WAC 388-78A-2600-2-a, WAC 388-78A-2600-2-g

The Department staff who did the on-site verification:
Paul Aube, ALF NCI

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

Sincerely,

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

This document was prepared by Residential Care Services for the Locator website.



Residential Care Services Investigation Summary Report

Provider/Facility: ST ANDREWS PLACE **Provider Type:** Assisted Living Facility
ASSISTED LIVING
License/Cert.#: 1195 **Intake ID:** 136612
Compliance Determination #: 44799 **Region/Unit #:** RCS Region 3 / Unit E
Investigator: Paul Aube
Investigation Date(s): 07/29/2024 through 07/29/2024
Complainant Contact Date(s):

Allegation(s):

Misappropriation of Property: Facility report of multiple residents reporting allegations of theft in the community.

Investigation Methods:

Sample:	Total residents: 39 Resident sample size: 3 Closed records sample size: 0
Observations:	Identified resident Residents Dining Resident rooms Staff to resident interactions Resident to resident interactions
Interviews:	Identified resident Nursing staff Management
Record Reviews:	Incident investigation Facility policies Negotiated Service Agreements Resident Handbook

Investigation Summary:

Misappropriation of Property: Facility failed to document investigative findings after investigation was reported to be completed. Facility failed to have policy on Exploitation, and what staff are to do when allegations of financial exploitation are reported. Failed practice identified.

Conclusion / Action:

- ☒ 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 #: 1195	Compliance Determination # 44799
Plan of Correction	ST ANDREWS PLACE ASSISTED LIVING	Completion Date
Page 1 of 5	Licensee: ST. ANDREWS RETIREMENT COMMUNITY	07/29/2024

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 07/29/2024 and 07/29/2024 of:

ST ANDREWS PLACE ASSISTED LIVING
520 EAST PARK AVE
PORT ANGELES, WA 98362

This document references the following complaint number(s): 136612

The following sample was selected for review during the unannounced on-site visit: 3 of 39 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Paul Aube, ALF NCI

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.

Cory Cisneros
Residential Care Services

08/02/2024
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.

This document was prepared by Residential Care Services for the Locator website.

Statement of Deficiencies License #: 1195 Compliance Determination # 44799
 Plan of Correction ST ANDREWS PLACE ASSISTED LIVING Completion Date
 Page 2 of 5 Licensee: ST. ANDREWS RETIREMENT COMMUNITY 07/29/2024

Laura Dodd
 Administrator (or Representative)

8/8/24
 Date

WAC 388-78A-2600 Policies and procedures.

(2) The assisted living facility must develop, implement and train staff persons on policies and procedures to address what staff persons must do:

- (a) Related to suspected abandonment, abuse, neglect, exploitation, or financial exploitation of any resident;
- (g) When there are urgent situations in the assisted living facility requiring additional staff support;

This requirement was not met as evidenced by:

Based on record review, and interview, the Assisted Living Facility (ALF) failed to develop, implement, and train staff persons on the process for allegations of financial exploitation of a vulnerable adult for 3 of 3 residents reviewed, (Resident 1 [R1], Resident 2 [R2], and Resident 3 [R3]). This failure placed R1, R2, R3, and all other residents who report allegations of financial exploitation at risk for financial exploitation, and decreased quality of life.

Findings included...

Review of Department Records on 06/28/2024 showed a report of theft of various items involving multiple residents in the facility. The report stated that R1 reported a missing laptop computer, R2 reported \$50 being taken out of their billfold in their room, and R3 reported missing jewelry and gems valuing approximately \$1200.

During an interview with Staff A, the Administrator, on 07/29/2024 at 10:28AM, Staff A was asked to summarize each incident as reported by each resident:

- R1: "[R1] takes classes at the library and at the senior center. [R1] said the computer was in [their] apartment in a recyclable grocery bag, and it wasn't there. I believe the last time it was seen, [R1] had it the previous day. I called the library, and no one turned it in. I called the senior center and the bus transportation center, and no one had turned one in." [Housekeeping] stated this was the second time the computer went missing. The last time it was reported missing, [Housekeeping] found it." Staff A stated that they called [Housekeeping] to ask them where they found R1's laptop the last time it went missing, and it was not where it found it last time. Staff A then stated, "For this, I could not substantiate it. I was not sure if [R1] misplaced it in the facility, or when [they] [were] out." Staff A was asked if they interviewed R1. Staff A stated that they had interviewed them. Staff A was asked what R1 felt about the incident. Staff A stated, "[R1] thinks that someone stole it."
- R2: "\$50 [they] said was taken out of [their] wallet. However, it was weeks or a month ago. [R2] has a back door that leads outside that [they] [do] not keep locked. [They] do

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Administrator (or Representative)

Date

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- R2: "\$50 [they] said was taken out of [their] wallet. However, it was weeks or a month ago. [R2] has a back door that leads outside that [they] [do] not keep locked. [They] do

not lock [their] apartment. [They] [have] lots of family that visits." Staff A was asked if they asked R2 why they waited so long to report the theft. Staff A stated, "[R2] said [they] didn't report it because [they] felt like it was [their] fault. I let [them] know that [they] should always report things like that right away. I filed the report, but after investigating, I cannot substantiate if it was staff, the family, or if [R2] misplaced it. [R2] had no timeline, so I had no way of doing it."

• R3: "So [R3's allegation] is about a year old. Back then [R3] had a heart attack and went to Tacoma. [R3's] family had come in and was cleaning [R3's] apartment out and getting it ready in case [they] had to move. [R3] had a cat, so staff did go in to feed the cat while [R3] was away. I did not know about the [missing] jewelry or the gems at that time, but [R3] told me about \$100 in small bills in [their] lock box went missing. I told [R3] that I thought [they] and I had been the only ones that had the keys. But [R3] let me know that [they] left the keys [to the lockbox] on the bed when [they] [were] away. Because I couldn't do anything about the money, [R3] then told me about the other missing jewelry, and gems. I then, with my staff, and with [R3] present, searched the building for the missing things. [Housekeeping] did find some of the gemstones in a drawer, but nothing else was found. I did not even know [R3] had these items in the building and was not sure if they were truly here. The family did say that when [R3] lived in California that [they] did collect gemstones. So anyway, I did not have enough information, and I was not able to substantiate this as well." Staff A was then asked to provide Incident Reports for the three residents for Department review. Staff A stated that they did not complete Incident Reports for any of the allegations of theft for R1, R2, or R3.

During an interview with R1, on 07/29/2023 at 11:13AM, R1 was asked if they could explain what happened with their missing laptop. R1 stated, "I don't know when it was taken, and I always have it my gray bag. I was taking classes at the library on Monday nights. I kept the computer in here." A thin gray nylon bag was observed to be sitting on R1's desk, which was empty. "I was getting ready to go to class the next day, and it was gone. They did a police report on it." R1 was asked when the last time they saw their laptop was. R1 reviewed their daily planner, and stated the last time they saw the laptop was on 06/25/2024. "That was my class day. And that was the last day that I saw my computer. I do not know when it was stolen, but the next day, according to my records here, I noticed it missing on the 26th." R1 stated that they had a different class on 06/26/2024 but did not attend due to their laptop missing. R1 was asked if they were certain that they brought it back into the facility. R1 stated, "I am certain that I brought it back. I had it in my gray bag." R1 was asked if they ever received any update on the investigation that the facility was conducting. "I have no idea. I have heard absolutely nothing." R1 was asked what they thought happened. "I feel that some staff took it. You got to have a key; I always lock my door. There is no possibility of my leaving it anywhere when I was out and about." R1 was asked how this made them feel. "I feel stressed."

During an interview with Staff C, a Caregiver, on 07/29/2024 at 1:05PM, Staff C was asked what types of incidents in the facility would require completion of an Incident Report. Staff C stated, "A [resident] fall, a confrontation, like a resident-to-resident or a resident-to-staff [altercation]." Staff C was asked if there was anything else that would constitute an Incident Report to be completed. Staff C stated that they could not think of anything else. Staff C was asked if allegations of abuse would constitute an incident report. Staff C stated, "Sure, we would. Not only do an Incident Report, but [Staff A]

would also have to report it [to the Department]." Staff C was again asked if there were any other incidents which would require an Incident Report to be Completed. Staff C again, stated they could not think of anything else. Staff C was asked if a resident allegation of theft would constitute an Incident Report. Staff C stated, "I would think so."

During an interview with Staff B, a Med Tech (medication technician), on 07/29/2024 at 1:13PM, Staff B was asked what types of incidents in the facility would require completion of an Incident Report. Staff B stated, "If someone had a fall, especially if they hit their head. Anything that constitutes calling 911. Medical Emergencies. Resident-to-resident altercations." Staff B stated that they could not think of anything else. Staff B was asked if allegations of abuse would constitute an incident report. Staff B stated, "If someone came to me and said that happened by so and so, I would do a report. I would call their POA (Power of Attorney), and I would let my boss know." Staff B was again asked if there were any other incidents which would require completion of an Incident Report. Staff B stated, "I can't think of anything else." Staff B was asked if theft would constitute an Incident Report. Staff B stated, "Yes. I know some people have dementia and they would say something like that, but if I am not sure I would just fill it out." Staff B was asked what type of training they have received on exploitation of a vulnerable adult. Staff B stated that they did not receive any training on theft specifically. Staff B was asked if they were aware of any written facility policy on exploitation of a vulnerable adult, or Incident Reports. Staff B stated they were unaware of any policy.

During an interview with Staff A on 07/29/2024 at 12:25PM, Staff A was asked what actions were taken in regard to R1's allegation of theft of their laptop. Staff A stated "I called the other places, library and bus depot. Called [R1's Family]. I have talked with staff and asked them if they've seen it. I did pull the schedule and look at who worked." Staff A was asked if any of these staff interviews were documented. Staff A stated that she did not. "I did not write it down, but I did talk with my staff." Staff A was asked if they spoke with any other residents about potential theft. Staff A stated that they spoke with a few residents. Staff A was asked if any of these resident interviews were documented. Staff A stated, "No I did not." Staff A was asked to provide a written policy on financial exploitation of a resident, and a written policy on when Incident Reports should be completed. On 07/29/2024 at 12:37PM, Staff A stated that they were unable to locate any policy on financial exploitation of a resident, or any policies on Incident Reports.

In another interview with Staff A on 07/29/2024 at 1:32PM, Staff A was asked if they had any written documentation of their investigation for R2, and R3's allegations of theft. Staff A stated that they did not. Staff A was asked if they felt there was a clear procedure or policy for them to follow when they were to receive any allegations of theft/financial exploitation of a resident. Staff A stated, "No."

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Statement of Deficiencies

License #: 1195

Compliance Determination # 44799

Plan of Correction

ST ANDREWS PLACE ASSISTED LIVING

Completion Date

Page 5 of 5

Licensee: ST. ANDREWS RETIREMENT COMMUNITY

07/29/2024

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, ST ANDREWS PLACE ASSISTED LIVING is or will be in compliance with this law and / or regulation on (Date) 8/26/24

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

Laura Dodd

Administrator (or Representative)

8/7/24

Date

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