STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

01/16/2024

BROOKDALE SENIOR LIVING COMMUNITIES INC
Brookdale Nine Mile
5329 WEST RIFLE CLUB COURT
SPOKANE, WA 99208

RE: Brookdale Nine Mile # 1698

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 35240 (Completion Date 01/16/2024) and 32183 (Completion Date 11/29/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 01/16/2024 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2450 Staff.

(2) The assisted living facility must:

(e) Ensure all resident care and services are provided only by staff persons who have the training, credentials, experience and other qualifications necessary to provide the care and services;

(h) Provide staff orientation and appropriate training for expected duties, including:

(i) Organization of the assisted living facility;

(ii) Physical assisted living facility layout;

(iii) Specific duties and responsibilities;

(iv) How to report resident abuse and neglect consistent with chapter 74.34 RCW and assisted living facility policies and procedures;

(v) Policies, procedures, and equipment necessary to perform duties;

(vii) Resident rights, including without limitation, those specified in chapter 70.129 RCW.

(3) The assisted living facility must:

(d) Maintain the following documentation on the assisted living facility premises, during

employment, and at least two years following termination of employment:

(i) Staff orientation and training or certification pertinent to duties, including, but not limited to:

(A) Training required by chapter 388-112A WAC;

WAC 388-78A-2462 Background checks Who is required to have.

(2) The assisted living facility must ensure that the administrator and all caregivers employed directly or by contract after January 7, 2012 have the following background checks:

(a) A Washington state name and date of birth background check; and

WAC 388-78A-24701 Background checks Employment Nondisqualifying information.

(1) If the background check results show that an employee or prospective employee has a criminal conviction or pending charge for a crime that is not a disqualifying crime under chapter 388-113 WAC, then the assisted living facility must determine whether the person has the character, competence and suitability to work with vulnerable adults in long-term care.

The Department staff who did the On Site verification:
Sylvia Shauvin, Complaint Investigator

If you have any questions, please contact me at (509)993-7821.

S.M

Sincerely,

Stephanie Jenks, Field Manager
Region 1, Unit B
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: Brookdale Nine Mile
Provider Type: Assisted Living Facility
License/Cert.#: 1698
Compliance Determination #: 32183
Intake ID: 101453
Investigator: Sylvia Shauvin
Region/Unit #: RCS Region 1 / Unit B
Investigation Date(s): 11/06/2023 through 11/29/2023
Complainant Contact Date(s):

Allegation(s):

1 - Staff is dismissive of resident's need for assistance with transfers
2 - Staff is impatient and yells at resident

Investigation Methods:

Sample:	Total residents: 43 Resident sample size: 5 Closed records sample size: 0
Observations:	Residents' safety and well-being Any unmet residents' needs Staff's interactions with residents Staff's response to residents' needs/concerns e.g. behaviors such as anxiety and agitation/aggression
Interviews:	Three residents including named resident/alleged victim Resident Care Coordinator Business Office Manager Two facility caregivers Agency licensed nurse Hospice nurse Human Resources staff Administrator
Record Reviews:	Sample residents' Face Sheets, assessments, and care plans Sample three staff's personnel records - included named staff Facility's investigation documents Policy and procedures - aggression

Investigation Summary:

1 - Review of sample staff's personnel files showed they did not complete facility orientation, cardiopulmonary resuscitation and first aid training, and specialty trainings. Failed facility practice was found and documented in Statement of Deficiencies (SOD) under Washington Administrative Code (WAC) 388-78a-2450(2)(e)(h)(i-vii), (3)(d)(i)(A)(C)(D) Staff.
2 - Review of sample staff's personnel files showed named staff did not have current Washington stated name and date of birth background check, and facility didn't

complete character, competence, and suitability review for them, as required. Failed facility practices were found and documented in the SOD under WAC 388-78a-2462 (2)(a) Background checks-Who is required to have, and WAC 388-78a-24701(1) Background checks-Employment-Non-disqualifying information.

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: Brookdale Nine Mile
Provider Type: Assisted Living Facility
License/Cert.#: 1698
Compliance Determination #: 32183
Intake ID: 103778
Investigator: Sylvia Shauvin
Region/Unit #: RCS Region 1 / Unit B
Investigation Date(s): 11/06/2023 through 11/29/2023
Complainant Contact Date(s):

Allegation(s):
1 - A resident required cardiopulmonary resuscitation (CPR), and hospitalization

Investigation Methods:

Sample:	Total residents: 43 Resident sample size: 5 Closed records sample size: 0
Observations:	Residents' well-being Any signs of unmet residents' needs Access to staff and means to summon staff's assistance Staff's response to residents' needs/concerns
Interviews:	Three residents including named resident/alleged victim Resident Care Coordinator Business Office Manager Two facility caregivers Agency licensed nurse Hospice nurse Human Resources staff Administrator
Record Reviews:	Sample residents' Face Sheets, assessments, and care plans Sample three staff's personnel records Facility's investigation documents Policy and procedures - cardiac & pulmonary resuscitation

Investigation Summary:
1 - Named resident was observed alert, and actively engaged in activities. Staff interview and review of documentation pertinent to named resident showed staff performed cardiopulmonary resuscitation (CPR) on resident, summoned emergency personnel, and had resident transported to the hospital. While hospitalized, named resident was treated was able to return to the facility. Review of sample staff's personnel files showed a caregiver did not have CPR and first aid training. Failed facility practice was found and documented in a Statement of Deficiencies under Washington Administrative Code (WAC) 388-78a-2450(2)(e)(h)(i-vii), (3)(d)(i)(A)(C)(D)

Staff.

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
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

Statement of Deficiencies	License #: 1698	Compliance Determination # 32183
Plan of Correction	Brookdale Nine Mile	Completion Date
Page 1 of 6	Licensee: BROOKDALE SENIOR LIVING COMMUNITIES INC	11/29/2023

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 11/06/2023, 11/06/2023 and 11/29/2023 of:

Brookdale Nine Mile
5329 WEST RIFLE CLUB COURT
SPOKANE, WA 99208

This document references the following complaint number(s): 101453, 103458, 103778, 104761

The following sample was selected for review during the unannounced on-site visit: 5 of 43 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Sylvia Shauvin, Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit B
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

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.

SM

Residential Care Services

12/05/2023

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)

12/07/2023
Date

WAC 388-78A-2450 Staff.

(2) The assisted living facility must:

(e) Ensure all resident care and services are provided only by staff persons who have the training, credentials, experience and other qualifications necessary to provide the care and services;

(h) Provide staff orientation and appropriate training for expected duties, including:

(i) Organization of the assisted living facility;

(ii) Physical assisted living facility layout;

(iii) Specific duties and responsibilities;

(iv) How to report resident abuse and neglect consistent with chapter 74.34 RCW and assisted living facility policies and procedures;

(v) Policies, procedures, and equipment necessary to perform duties;

(vii) Resident rights, including without limitation, those specified in chapter 70.129 RCW.

(3) The assisted living facility must:

(d) Maintain the following documentation on the assisted living facility premises, during employment, and at least two years following termination of employment:

(i) Staff orientation and training or certification pertinent to duties, including, but not limited to:

(A) Training required by chapter 388-112A WAC;

This requirement was not met as evidenced by:

(C) Cardiopulmonary resuscitation;

(D) First aid

Based on observation, interview, and record review, the facility failed to ensure staff completed facility orientation, cardiopulmonary resuscitation and first aid training, and specialty trainings for 3 of 3 sampled staff (Staff C, D, and E). This failure placed residents at risk for unmet care needs.

Statement of Deficiencies	License #: 1698	Compliance Determination # 32183
Plan of Correction	Brookdale Nine Mile	Completion Date
Page 3 of 6	Licensee: BROOKDALE SENIOR LIVING COMMUNITIES INC	11/29/2023

Findings included...

<Staff C>

On 11/06/2023 from 11:30 AM to 3:35 PM, observations showed the facility provided care to residents with [redacted] and [redacted] diagnoses.

Review of the facility's Associate Roster showed Staff C, Caregiver, was hired on 03/22/2022.

Review of Staff C's personnel file showed no documentation of facility orientation or dementia and mental health specialty trainings.

On 11/06/2023 at 1:55 PM, Staff C was observed providing care to residents.

<Staff D>

Review of the facility's Associate Roster showed Staff D, Caregiver, was hired on 06/19/2023.

Review of the facility's October 2023 and November 2023 staff schedules showed Staff D worked in the facility as a caregiver.

Review of Staff D's personnel file showed no documentation of facility orientation or cardiopulmonary resuscitation (CPR) and first aid training.

On 11/27/2023 at 1:45 PM, Staff B, Human Resources stated that Staff D was scheduled to complete CPR and first aid training in December 2023.

>Staff E>

Review of the facility's Associate Roster showed Staff E, Caregiver, was hired on 07/31/2023.

On 11/06/2023 at 2:00 PM, Staff E was observed providing care to residents.

Review of Staff E's personnel file showed no documentation of facility orientation.

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 Nine Mile is or will be in compliance with this law and / or regulation on (Date) 12/16/2023 .

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

Administrator (or Representative) 12/02/2023 Date

WAC 388-78A-2462 Background checks Who is required to have.

(2) The assisted living facility must ensure that the administrator and all caregivers employed directly or by contract after January 7, 2012 have the following background checks:

(a) A Washington state name and date of birth background check; and

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the facility failed to ensure a Washington state name and date of birth background check was completed for 1 of 3 sampled caregivers (Staff C). This failure placed residents at risk of receiving care from a potentially disqualified staff.

Findings included...

The facility's Associate Roster showed Staff C, Caregiver, was hired on 03/22/2022.

On 11/06/2023 at 1:55 PM, Staff C was observed providing care to residents.

Review of Staff C's personnel file showed no documentation of a current Washington state name and date of birth background check.

In an interview on 11/27/2023 at 1:45 PM, Staff B, Human Resources, stated the facility did not have a Washington state name and date of birth background check for Staff C.

Statement of Deficiencies	License #: 1698	Compliance Determination # 32183
Plan of Correction	Brookdale Nine Mile	Completion Date
Page 5 of 6	Licensee: BROOKDALE SENIOR LIVING COMMUNITIES INC	11/29/2023

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 Nine Mile is or will be in compliance with this law and / or regulation on (Date) 12/16/2023 .

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

Administrator (or Representative) 12/02/2023 Date

WAC 388-78A-24701 Background checks Employment Nondisqualifying information.

(1) If the background check results show that an employee or prospective employee has a criminal conviction or pending charge for a crime that is not a disqualifying crime under chapter 388-113 WAC, then the assisted living facility must determine whether the person has the character, competence and suitability to work with vulnerable adults in long-term care.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the facility failed to complete a character, competence, and suitability review for 1 of 3 sampled caregivers (Staff C) that did not have a disqualifying crime. This failure placed residents at risk of receiving care from a potentially disqualified staff.

Findings included...

Review of Staff C's, Caregiver, personnel file showed their 04/04/2022 fingerprint background check required a character, competence, and suitability review (CCSR).

On 11/06/2023 at 1:55 PM, Staff C was observed providing care to residents.

In an interview on 11/27/2023 at 1:45 PM, Staff B, Human Resources, stated the facility did not have a completed CCSR for Staff C.

Plan/Attestation Statement

Statement of Deficiencies	License #: 1698	Compliance Determination # 32183
Plan of Correction	Brookdale Nine Mile	Completion Date
Page 6 of 6	Licensee: BROOKDALE SENIOR LIVING COMMUNITIES INC	11/29/2023

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 Nine Mile is or will be in compliance with this law and / or regulation on (Date) 12/16/2023 .

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

Administrator (or Representative) 12/02/2023 Date