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

Woodland Retirement & Assisted Living Community LLC
Woodland Retirement & Assisted Living Community
3425 Boone Rd SE
SALEM, OR 97317

RE: Woodland Retirement & Assisted Living Community License # 1709

Dear Administrator:

This letter addresses Compliance Determination(s) 35371 (Completion Date 01/19/2024) and 29121 (Completion Date 09/11/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 01/19/2024 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-2462-2, WAC 388-78A-2462-2-a, WAC 388-78A-2462-2-b

The Department staff who did the on-site verification:
Anissa Bearden, Licensor

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

Sincerely,

Cory Cisneros

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

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

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 follow-up on 09/09/2023 and 09/12/2023 of:
Woodland Retirement & Assisted Living Community
4532 INTELCO LOOP SE
LACEY, WA 98503

This document references the following SOD dated: 09/11/2023

The following sample was selected for review during the unannounced on-site visit: 62 of 62 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Maria Salas, ALF Complaint Investigator
Anissa Bearden, Licensor
Celeste Vashey, ALF LTC Licensor

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

09/19/2023
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.

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

800 NE 136th Ave Ste 200, Vancouver, WA 98684

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 follow-up on 09/08/2023 and 09/12/2023 of:

Woodland Retirement & Assisted Living Community
4532 INTELCO LOOP SE
LACEY, WA 98503

This document references the following SOD dated: 09/11/2023

The following sample was selected for review during the unannounced on-site visit: 62 of 62 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Maria Salas, ALF Complaint Investigator
Anissa Bearden, Licensor
Celeste Vashey, ALF LTC Licensor

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.

Residential Care Services

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) 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

(b) A national fingerprint background check.

This requirement was not met as evidenced by:

Based on record review and interview, the facility failed to ensure staff had a Washington State name and date-of-birth background check and national fingerprint background check for 8 of 8 sampled staff (Staff B, Staff C, Staff D, Staff E, Staff F, Staff G, Staff H, and Staff I) reviewed. This failure placed 62 of 62 residents at risk for being cared for by staff members with potentially disqualifying background checks.

Findings included...

Record review of the Facility's Action Plan to Address Cited Issues, accepted 04/18/2023, showed "Management is to have potential new hires complete WA background check form that is to be submitted same day of completion. Prior to scheduling of orientation background results will be reviewed. Employees during their orientation will schedule fingerprint appointments with management for nearest and available date to ensure completion." The responsible party showed it was the executive director and assistant executive director who were responsible and that the estimated date of completion was 06/22/2023.

In an interview on 09/08/2023 at 11:03 AM Staff J, Registered Nurse, stated Staff K, Assistant Executive Director was responsible to ensure facility staff completed their background checks. Staff J stated when a new employee was hired, they scheduled their fingerprint background checks at the facility orientation.

In an interview on 09/11/2023 at 10:05 AM, Staff A, Executive Director stated to their knowledge facility staff background checks were not kept on site to review. Staff A stated to their knowledge HR (Human Resources) was responsible for facility staffs completed Washington State name and date-of-birth background check and national fingerprint background checks.

Administrator (or Representative) 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

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This requirement was not met as evidenced by:

Based on record review and interview, the facility failed to ensure staff had a Washington State name and date-of-birth background check and national fingerprint background check for 8 of 8 sampled staff (Staff B, Staff C, Staff D, Staff E, Staff F, Staff G, Staff H, and Staff I) reviewed. This failure placed 62 of 62 residents at risk for being cared for by staff members with potentially disqualifying background checks.

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In an interview on 09/08/2023 at 11:03 AM Staff J, Registered Nurse, stated Staff K, Assistant Executive Director was responsible to ensure facility staff completed their background checks. Staff J stated when a new employee was hired, they scheduled their fingerprint background checks at the facility orientation.

In an interview on 09/11/2023 at 10:05 AM, Staff A, Executive Director stated to their knowledge facility staff background checks were not kept on cite to review. Staff A stated to their knowledge HR (Human Resources) was responsible for facility staffs completed Washington State name and date-of-birth background check and national fingerprint background checks.

Staff B

Record review of the facility's Employee List, undated, showed Staff B, Caregiver, was hired on 11/19/2016.

Record review of Staff B's Notification of Background Check Result - Interim Fingerprint, completed on 05/15/2023 showed the "Information reported by one or more background check sources that requires a Character, Competence, and Suitability review."

Record review of "RCS Character, Competence, and Suitability (CCS) Determination for Unsupervised Access to Minors and Vulnerable Adults", dated 05/15/2023, results section showed Staff B "May have unsupervised access to minors or vulnerable adults"

In an interview on 09/11/2023 at 12:13 PM, Staff A stated the facility completed Staff B's CCS determination and found Staff B could have unsupervised access to the residents. Staff A was unsure why the facility did not have a copy of Staff B's final fingerprint background check to review.

There were no records provided to review that showed Staff B had completed their Washington State name and date-of-birth background check and that they had a completed Notification of Background Check Result - Final Fingerprint background check.

Staff C

Record review of the facility's Employee List, undated, showed Staff C, Caregiver was hired on 03/10/2020.

There were no records provided to review that showed Staff C had completed their Washington State name and date-of-birth background check.

Staff D

Record review of the facility's Employee List, undated, showed Staff D, Caregiver was hired on 09/27/2022.

There were no records provided to review that showed Staff D had completed their Washington State name and date-of-birth background check.

Staff E

Staff B

Record review of the facility's Employee List, undated, showed Staff B, Caregiver, was hired on 11/10/2016.

Record review of Staff B's Notification of Background Check Result - Interim Fingerprint, completed on 05/15/2023 showed the "Information reported by one or more background check sources that requires a Character, Competence, and Suitability review."

Record review of "RCS Character, Competence, and Suitability (CCS) Determination for Unsupervised Access to Minors and Vulnerable Adults", dated 05/15/2023, results section showed Staff B "May have unsupervised access to minors or vulnerable adults"

In an interview on 09/11/2023 at 12:13 PM, Staff A stated the facility completed Staff B's CCS determination and found Staff B could have unsupervised access to the residents. Staff A was unsure why the facility did not have a copy of Staff B's final fingerprint background check to review.

There were no records provided to review that showed Staff B had completed their Washington State name and date-of-birth background check and that they had a completed Notification of Background Check Result - Final Fingerprint background check.

Staff C

Record review of the facility's Employee List, undated, showed Staff C, Caregiver was hired on 03/10/2020.

There were no records provided to review that showed Staff C had completed their Washington State name and date-of-birth background check.

Staff D

Record review of the facility's Employee List, undated, showed Staff D, Caregiver was hired on 09/27/2022.

There were no records provided to review that showed Staff D had completed their Washington State name and date-of-birth background check.

Staff E

Record review of the facility's Employee List, undated, showed Staff E, Caregiver was hired on 10/11/2022.

Record review of Staff E's "Entity Notification Additional Information Requested", request dated 05/18/2023, showed additional information was needed for Staff E. The Background Check Central Unit could not complete the background check without additional information from Staff E. "Based on your program rules, the applicant may not be allowed to have unsupervised access to children or vulnerable individuals until the background check is complete and the results are reviewed by your office."

In an interview on 09/11/2023 at 12:13 PM, Staff A stated Staff E had been informed that they needed additional information to complete their background check. Staff A stated facility staff were trying to get ahold of Staff E to complete their background check.

There were no records provided to review that showed Staff E had completed their Washington State name and date-of-birth background check and that they had a completed Notification of Background Check Result - Final Fingerprint background check.

Staff F

Record review of the facility's Employee List, undated, showed Staff F, Caregiver was hired on 09/15/2022.

Record review of Staff F's Notification of Background Check Result - Interim Fingerprint, completed on 04/22/2023 showed no concerns.

There were no records provided to review that showed Staff F had completed their Washington State name and date-of-birth background check and that they had a completed Notification of Background Check Result - Final Fingerprint background check.

Staff G

Record review of the facility's Employee List, undated, showed Staff G, Receptionist was hired on 08/22/2023.

There were no records provided to review that showed Staff G had completed their Notification of Background Check Result - Final Fingerprint background check.

Staff H

Record review of the facility's Employee List, undated, showed Staff E, Caregiver was hired on 10/11/2022.

Record review of Staff E's "Entity Notification Additional Information Requested", request dated 05/16/2023, showed additional information was needed for Staff E. The Background Check Central Unit could not complete the background check without additional information from Staff E. "Based on your program rules, the applicant may not be allowed to have unsupervised access to children or vulnerable individuals until the background check is complete and the results are reviewed by your office."

In an interview on 09/11/2023 at 12:13 PM, Staff A stated Staff E had been informed that they needed additional information to complete their background check. Staff A stated facility staff were trying to get ahold of Staff E to complete their background check.

There were no records provided to review that showed Staff E had completed their Washington State name and date-of-birth background check and that they had a completed Notification of Background Check Result - Final Fingerprint background check.

Staff F

Record review of the facility's Employee List, undated, showed Staff F, Caregiver was hired on 09/15/2022.

Record review of Staff F's Notification of Background Check Result - Interim Fingerprint, completed on 04/22/2023 showed no concerns.

There were no records provided to review that showed Staff F had completed their Washington State name and date-of-birth background check and that they had a completed Notification of Background Check Result - Final Fingerprint background check.

Staff G

Record review of the facility's Employee List, undated, showed Staff G, Receptionist was hired on 08/22/2023.

There were no records provided to review that showed Staff G had completed their Notification of Background Check Result - Final Fingerprint background check.

Staff H

Record review of the facility's Employee List, undated, showed Staff H, Server was hired on 09/31/2023.

In an interview on 09/11/2023 at 10:52 AM, Staff A stated Staff H was no longer employed at the facility, and they were informed that once an employee no longer worked for the company their records were not retained.

In an interview on 09/11/2023 at 12:13 PM, Staff A stated they had previously misspoken, and the facility had Staff H's records off site. Staff A was unable to provide Staff H's Washington State name and date-of-birth background check and their Notification of Background Check Result - Final Fingerprint background check.

There were no records provided to review that showed Staff H had completed their Washington State name and date-of-birth background check and that they had a completed Notification of Background Check Result - Final Fingerprint background check.

Staff I

Record review of the facility's Employee List, undated, showed Staff I, Server was hired on 09/25/2023.

There were no records provided to review that showed Staff I had completed their Notification of Background Check Result - Final Fingerprint background check.

In an interview on 09/11/2023 at 12:13 PM, Staff A stated part of the plan of correction was that Staff K would audit all staff members who needed to complete their Washington State name and date-of-birth background checks and their fingerprint background checks. Staff A stated they thought Administrators and housekeeping staff did not need to complete fingerprint background checks. Staff A stated direct care staff such as caregivers needed completed fingerprint background checks. Staff A stated Staff I was a server, and they did not need a completed fingerprint background check. Staff A stated Staff C, Staff F, and Staff G needed completed fingerprint background checks that the facility was working on obtaining them. Staff A acknowledged that the facility stated they would be back in compliance for background checks and that they could not provide needed documentation to demonstrate they were back in compliance.

This is an uncorrected deficiency previously cited on 08/02/2023 and a recurring deficiency previously cited on 09/16/2021.

Plan/Attestation Statement

Record review of the facility's Employee List, undated, showed Staff H, Server was hired on 08/31/2023.

In an interview on 09/11/2023 at 10:52 AM, Staff A stated Staff H was no longer employed at the facility, and they were informed that once an employee no longer worked for the company their records were not retained.

In an interview on 09/11/2023 at 12:13 PM, Staff A stated they had previously misspoken, and the facility had Staff H's records off cite. Staff A was unable to provide Staff H's Washington State name and date-of-birth background check and their Notification of Background Check Result - Final Fingerprint background check.

There were no records provided to review that showed Staff H had completed their Washington State name and date-of-birth background check and that they had a completed Notification of Background Check Result - Final Fingerprint background check.

Staff I

Record review of the facility's Employee List, undated, showed Staff I, Server was hired on 08/25/2023.

There were no records provided to review that showed Staff I had completed their Notification of Background Check Result - Final Fingerprint background check.

In an interview on 09/11/2023 at 12:13 PM, Staff A stated part of the plan of correction was that Staff K would audit all staff members who needed to complete their Washington State name and date-of-birth background checks and their fingerprint background checks. Staff A stated they thought Administrators and housekeeping staff did not need to complete fingerprint background checks. Staff A stated direct care staff such as caregivers needed completed fingerprint background checks. Staff A stated Staff I was a server, and they did not need a completed fingerprint background check. Staff A stated Staff C, Staff F, and Staff G needed completed fingerprint background checks that the facility was working on obtaining them. Staff A acknowledged that the facility stated they would be back in compliance for background checks and that they could not provide needed documentation to demonstrate they were back in compliance.

This is an uncorrected deficiency previously cited on 06/02/2023 and a recurring deficiency previously cited on 09/16/2021.

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, Woodland Retirement & Assisted Living Community is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____

Administrator (or Representative) Date

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, Woodland Retirement & Assisted Living Community is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____

Administrator (or Representative) Date

Residential Care Services
Investigation Summary Report

Provider/Facility: Woodland Retirement & Assisted Living Community
License/Cert.#: 1709
Compliance Determination #: 22607
Investigator: Maria Salas
Investigation Date(s): 04/18/2023 through 06/02/2023
Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 73616
Region/Unit #: RCS Region 3 / Unit E

Allegation(s):
Allegations of inappropriate misconduct by staff towards resident.

Investigation Methods:

Sample:	Total residents: 63 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 Residents
Record Reviews:	Incident investigation State reporting log Personnel files

Investigation Summary:
Based on interview. record review and observation the incident was resolved with no further inappropriate behaviors or concerns by resident. Facility did fail to ensure background checks were completed for hired employees with direct contact with vulnerable adults. Failed practice found.

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
800 NE 136th Ave Ste 200, Vancouver, WA 98684

Statement of Deficiencies	License #:1709	Compliance Determination #:22607
Plan of Correction	Woodland Retirement & Assisted Living Community	Completion Date
Page 1 of 4	Licensee: Woodland Retirement & Assisted Living Community LLC	06/02/2023

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 04/18/2023 and 06/08/2023 of:

Woodland Retirement & Assisted Living Community
4532 INTELCO LOOP SE
LACEY, WA 98503

This document references the following complaint number(s): 73616

The following sample was selected for review during the unannounced on-site visit: 3 of 83 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Maria Salas, ALF 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

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

06/15/2023
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.

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

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Residential Care Services

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) 6/15/23 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

(b) A national fingerprint background check.

This requirement was not met as evidenced by:

Based on record review and interviews, the facility failed to ensure staff had a Washington State name and date-of-birth background check and national fingerprint background check for 11 out of 51 staff (Staff A, Staff B, Staff C, Staff D, Staff E, Staff F, Staff G, Staff H, Staff I, Staff J, and Staff K) reviewed. This failure placed 63 of 63 residents at risk for being cared for by staff members with potentially disqualifying background checks.

Findings included...

Record reviewed of the employee file for Staff A, Medication Technician, on 04/18/2023, showed no Washington State name and date-of-birth background check and no federal fingerprint background check was found in file.

Record reviewed of the employee file for Staff B, Caregiver, on 04/18/2023, showed no Washington State name and date-of-birth background check and no federal fingerprint background check was found in file.

Record review of the facility's Safety Plan to address not having staff background checks, dated 04/18/2023 at 8:28pm, written by Staff L, Assistant Executive Director , showed that the following staff members did not have the required Washington State name and date-of-birth background check completed prior to working with vulnerable adults:
Staff A, Medication Technician, was hired on 07/01/2022.
Staff B, Caregiver, was hired on 12/15/2021.
Staff C, Caregiver, was hired on 11/10/2016.
Staff D, Caregiver, was hired on 06/21/2022.
Staff E, Maintenance, was hired on 09/27/2022.
Staff F, Caregiver, was hired on 10/11/2022.
Staff G, Caregiver, was hired on 09/15/2022.
Staff H, Caregiver, was hired on 04/12/2023.
Staff I, Medication Technician, was hired on 03/24/2023.

Administrator (or Representative) 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:

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Based on record review and interviews, the facility failed to ensure staff had a Washington State name and date-of-birth background check and national fingerprint background check for 11 out of 51 staff (Staff A, Staff B, Staff C, Staff D, Staff E, Staff F, Staff G, Staff H, Staff I, Staff J, and Staff K) reviewed. This failure placed 63 of 63 residents at risk for being cared for by staff members with potentially disqualifying background checks.

Findings included…

Record reviewed of the employee file for Staff A, Medication Technician, on 04/18/2023, showed no Washington State name and date-of-birth background check and no federal fingerprint background check was found in file.

Record reviewed of the employee file for Staff B, Caregiver, on 04/18/2023, showed no Washington State name and date-of-birth background check and no federal fingerprint background check was found in file.

Record review of the facility's Safety Plan to address not having staff background checks, dated 04/18/2023 at 6:28pm, written by Staff L, Assistant Executive Director , showed that the following staff members did not have the required Washington State name and date-of-birth background check completed prior to working with vulnerable adults:
Staff A, Medication Technician, was hired on 07/01/2022.
Staff B, Caregiver, was hired on 12/15/2021.
Staff C, Caregiver, was hired on 11/10/2016.
Staff D, Caregiver, was hired on 06/21/2022.
Staff E, Maintenance, was hired on 09/27/2022.
Staff F, Caregiver, was hired on 10/11/2022.
Staff G, Caregiver, was hired on 09/15/2022.
Staff H, Caregiver, was hired on 04/12/2023.
Staff I, Medication Technician, was hired on 03/24/2023.

Staff J, Medication Technician, was hired on 04/09/2023.
Staff K, Caregiver, was hired on 03/19/2020.

The following staff members did not have the required federal fingerprint background check completed within 120 days of hire:
Staff A, Medication Technician, was hired on 07/01/2022.
Staff B, Caregiver, was hired on 12/15/2021.
Staff C, Caregiver, was hired on 11/10/2016.
Staff D, Caregiver, was hired on 06/21/2022.
Staff E, Maintenance, was hired on 09/27/2022.
Staff F, Caregiver, was hired on 10/11/2022.
Staff G, Caregiver, was hired on 09/15/2022.
Staff K, Caregiver, was hired on 03/19/2020.

In an interview on 04/18/2023 at 4:21pm, Staff M, Executive Director (ED), stated that Staff L was responsible for ensuring background checks for facility staff were completed and copies were placed in the employee files. Staff M stated that she was unable to give a reason why completed background checks were not in Staff A and Staff B's the employee files.

In an interview on 04/19/2023 at 4:26pm, Staff L stated that no background checks had been completed for Staff A and Staff B when hired at the facility. Staff L stated that employee background checks were kept in each employee's file, and on Staff L's work computer.

In an interview on 04/20/2023 at 10:09am, Staff L stated that for newly hired staff, they were asked to fill out the Washington State name and date-of-birth background check form during the beginning of their new hire orientation process. Before the new hire was finished with the orientation, the state background check results would have been completed. A copy of the background check would have been placed in their employee file prior to when the new hire started their first shift. Staff L stated she was aware that the results of the state background check were needed prior to the employee starting work around the residents. Staff L stated that within the first two weeks of employment with the facility she would schedule newly hired staff for their federal fingerprint background check. Staff L stated she was the person responsible for ensuring background checks had been completed for all facility staff and placed the background checks in the employee files.

This is a recurring deficiency previously cited on 09/16/2021.

Staff J, Medication Technician, was hired on 04/03/2023.
Staff K, Caregiver, was hired on 03/10/2020.

The following staff members did not have the required federal fingerprint background check completed within 120 days of hire:
Staff A, Medication Technician, was hired on 07/01/2022.
Staff B, Caregiver, was hired on 12/15/2021.
Staff C, Caregiver, was hired on 11/10/2016.
Staff D, Caregiver, was hired on 06/21/2022.
Staff E, Maintenance, was hired on 09/27/2022.
Staff F, Caregiver, was hired on 10/11/2022.
Staff G, Caregiver, was hired on 09/15/2022.
Staff K, Caregiver, was hired on 03/10/2020.

In an interview on 04/18/2023 at 4:21pm, Staff M, Executive Director (ED), stated that Staff L) was responsible for ensuring background checks for facility staff were completed and copies were placed in the employee files. Staff M stated that she was unable to give a reason why completed background checks were not in Staff A and Staff B's the employee files.

In an interview on 04/18/2023 at 4:26pm, Staff L stated that no background checks had been completed for Staff A and Staff B when hired at the facility. Staff L stated that employee background checks were kept in each employee's file, and on Staff L's work computer.

In an interview on 04/20/2023 at 10:09am, Staff L stated that for newly hired staff, they were asked to fill out the Washington State name and date-of-birth background check form during the beginning of their new hire orientation process. Before the new hire was finished with the orientation, the state background check results would have been completed. A copy of the background check would have been placed in their employee file prior to when the new hire started their first shift. Staff L stated she was aware that the results of the state background check were needed prior to the employee starting work around the residents. Staff L stated that within the first two weeks of employment with the facility she would schedule newly hired staff for their federal fingerprint background check. Staff L stated she was the person responsible for ensuring background checks had been completed for all facility staff and placed the background checks in the employee files.

This is a recurring deficiency previously cited on 09/16/2021.

Plan/Attestation Statement

Statement of Deficiencies	License #: 1709	Compliance Determination #: 22607
Plan of Correction	Woodland Retirement & Assisted Living Community	Completion Date
Page 4 of 4	Licensee: Woodland Retirement & Assisted Living Community LLC	06/02/2023

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, Woodland Retirement & Assisted Living Community is or will be in compliance with this law and / or regulation on (Date) 7-25-23.

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

Administrator (or Representative) — Date: 6/15/23

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, Woodland Retirement & Assisted Living Community is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____

Administrator (or Representative) Date

Cited WAC	Investigators Comments / Complaints	Expected Outcomes	Action Plan to Address Cited Issues	Responsible Party	Estimated Date of Completion	Actual Date of Completion
CD 22607/ WAC 388-78A-2462	Based on record review and interviews, the facility failed to ensure staff had a Washington State name and date of birth background check and national fingerprint background check for 11 out of 51 staff. This failure placed 63 of 63 residents at risk for being care for by staff members with potentially disqualifying background checks.	The facility management/admin is to upon interview ensuring potential staff is completing a WA background check form, in the event potential employee is hired we can ensure we have the needed information in a timely manner as well as backgrounds ran with results by next date or orientation prior to staff working the floor.	Management is to have potential new hires complete WA background check form that is to be sumbitted same day of completion. Prior to scheduling of orientation background results will be reviewed. Employees during their orientation will schedule fingerprint appointments with management for nearest available date to ensure completion.	ED/AED	6/22/2023	