STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

03/13/2024

Mt Vernon Operations LLC
THE BRIDGE ASSISTED LIVING AT MOUNT VERNON
301 S Laventure Rd
Mount Vernon, WA 98274

RE: THE BRIDGE ASSISTED LIVING AT MOUNT VERNON # 1826

Dear Administrator:

This document references Compliance Determination 34186 (02/29/2024), which included complaint number(s) 110246, 107599.
The Department completed a complaint investigation of your Assisted Living Facility on 02/29/2024 and found that your facility does not meet the Assisted Living Facility requirements.

The department staff who did the inspection and provided consultation:

Karen Glover, Complaint Investigator

Consultation:

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 facility failed to complete the character, competence and suitability (CCS) determination after a background check came back showing a criminal conviction. The Business office manager completed the CCS review immediately upon request.

You Must:
- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:
- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:
- Inspect the facility to determine if you have corrected all deficiencies.

You May:
- Contact me for clarification of the deficiency or deficiencies found.

In Addition, You May:
- Request an **Informal Dispute Resolution (IDR)** review within 10 working days after you receive this letter. Your IDR request **must** include:
  - What specific deficiency or deficiencies you disagree with;
  - Why you disagree with each deficiency; and
  - Whether you want an IDR to occur in-person, by telephone or as a paper review.
  - Send your request to:

IDR Program Manager
Department of Social and Health Services
Aging and Long-Term Support Administration
Residential Care Services
PO Box 45600
Olympia, WA 98504-5600

If You Have Any Questions:
- Please contact me at (360)651-6846.

Sincerely,

Kim Ripley

Kimberley Ripley, Field Manager
Region 2, Unit A
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: THE BRIDGE ASSISTED LIVING AT MOUNT VERNON
License/Cert.#: 1826
Compliance Determination #: 34186
Investigator: Karen Glover
Investigation Date(s): 12/20/2023 through 02/29/2024
Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 107599
Region/Unit #: RCS Region 2 / Unit A

Allegation(s):

A new employee had no experience and was not qualified to be directing patients, doing care plans, or handling narcotics. The employee was a former drug addict with multiple drug thefts on their record for stealing and forging an order on a doctor's prescription pad.

Investigation Methods:

Sample:	Total residents: 35 Resident sample size: 4 Closed records sample size: 0
Observations:	Residents Resident rooms Staff to resident interactions
Interviews:	Residents Business office manager Administration
Record Reviews:	Employee files Background checks Job description

Investigation Summary:

Review of the named employee file showed a background check was completed that came back with a character, competence and suitability (CCS) review required. The CCS review was completed with the determination that the employee may have unsupervised access with vulnerable adults. Review of the job description for the resident care coordinator (RCC) showed the RCC must possess at a minimum a high school diploma, and one year of experience with senior services. Review of the medication technician checklist for the new employee showed it was completed and review of resume showed they had more than one year of experience working with seniors. No failed practice was identified.

Conclusion / Action:

☐ Failed Provider Practice Identified / Citation(s) Written

☒ Failed Provider Practice Not Identified / No Citation Written

☐ N/A