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

Victoria Aid Opco LLC
Victoria Place
491 Discovery Rd
Port Townsend, WA 98368

RE: Victoria Place License # 2185

Dear Administrator:

This letter addresses Compliance Determination(s) 31707 (Completion Date 10/25/2023) and 28431 (Completion Date 08/29/2023).

The Department completed a follow-up inspection of your Assisted Living Facility on 10/25/2023 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-2660-1

The Department staff who did the on-site verification:
Phan Pham, Nurse Surveyor

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

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

Residential Care Services
Investigation Summary Report

Provider/Facility: Victoria Place
Provider Type: Assisted Living Facility
License/Cert.#: 2185
Compliance Determination #: 28431
Intake ID: 91155
Investigator: Phan Pham
Region/Unit #: RCS Region 3 / Unit E
Investigation Date(s): 08/21/2023 through 08/29/2023
Complainant Contact Date(s): 08/15/2023, 09/05/2023

Allegation(s):

False billing - Named resident's representative received allegedly incorrect billing statements for named resident and was not able to receive assistance from the assisted living facility staff to resolve the issue.

Investigation Methods:

Sample:	Total residents: 27 Resident sample size: 3 Closed records sample size: 1
Observations:	Residents, environment, staff interactions with residents, staff members providing care and services, infection control practice, and safety measures.
Interviews:	Residents, staff members, administrative and member not associated with the facility.
Record Reviews:	Sampled residents and incident reports.

Investigation Summary:

An investigation was conducted, and allegation identified in the intake related to false billing, care and services were reviewed. The Assisted Living Facility failed to ensure prompt efforts were provided by management staff to resolve grievances in a timely manner. Additional residents reviewed for billings, care, services and safety had no concerns.

Conclusion / Action:

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

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

Statement of Deficiencies	License #: 2185	Compliance Determination # 28431
Plan of Correction	Victoria Place	Completion Date
Page 1 of 3	Licensee: Victoria Aid Opco LLC	08/29/2023

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 08/21/2023, 08/21/2023, 08/29/2023 and 09/05/2023 of:

Victoria Place
491 Discovery Rd
Port Townsend, WA 98368

This document references the following complaint number(s): 91155

The following sample was selected for review during the unannounced on-site visit: 3 of 27 current residents and 1 former residents.

The department staff that investigated the Assisted Living Facility:

Phan Pham, Nurse Surveyor

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 — 09/05/2023 — 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.

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Administrator (or Representative) 9/8/2023 Date

WAC 388-78A-2660 Resident rights. The assisted living facility must:

(1) Comply with chapter 70.129 RCW, Long-term care resident rights;

This requirement was not met as evidenced by:

Based on interviews and record reviews, the Assisted Living Facility (ALF) failed to ensure prompt efforts were provided by management staff to resolve grievances in a timely manner in accordance with RCW 70.129.060(2) for 1 of 1 sampled resident (Resident 1). This failure placed residents at risk for not having their grievances resolved promptly.

Findings included...

Review of Resident 1 (R1) face sheet showed the resident admitted to the facility on [redacted]/2020 with diagnoses including [redacted]. The resident's negotiated service agreement dated 12/09/2021 showed R1 required assistance with his activities of daily living and managing his finances. The resident was discharged from the ALF on [redacted]/2022.

On 08/23/2023 at 4:00 PM, the Department's representative received R1's accounting activity report from Staff A, Regional Director of Operations, that showed the ending balance was $0.00.

During an interview on 08/15/2023 at 9:09 AM, Collateral Contact 1 (CC1) stated R1 had been discharged from the ALF in [redacted] 2022. CC1 stated on 11/12/2022 she received a letter dated 10/07/2022 from the corporation's account receivable unit that showed the resident had an outstanding balance of $6,508.60. CC1 said up to that point she did not receive any communication from the ALF related to R1's billing. CC1 said she had attempted to communicate with the ALF's management staff and had not heard from them. CC1 stated in December 2022 she received a letter dated 12/06/2022 from a collection agency that showed the resident owed $6,508.60. CC1 said since May 2023 she had received multiple phone calls from the collection agency asking for the balance to be paid. CC1 stated she had asked the Executive Director (Staff B) for assistance and the issue had not been resolved.

During an interview on 08/29/2023 at 3:47 PM, Staff B said she had a meeting with the resident's representative and the Ombudsman in July 2023 regarding R1's billing statements. Staff B stated she had informed the corporation's account receivable staff and asked them to contact the resident's representative. Staff B said as far as she knew, the corporation's account receivable representative had not reached out to the resident's

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family. Staff B stated for any residents' billing discrepancies she would notify the corporation's account receivable representative and the corporation's representative was responsible for ensuring billing issues were resolved.

During an interview on 09/01/2023 at 9:41 AM, Staff A said she had reviewed R1's statements and the balance was zero as of 09/01/2023.

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, Victoria Place is or will be in compliance with this law and / or regulation on (Date) 10/15/2023

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

Administrator (or Representative) 9/15/2023 Date

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