



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

07/07/2025

EMERITUS CORPORATION
Brookdale Stanwood
7212 265TH ST NW
STANWOOD, WA 98292

RE: Brookdale Stanwood # 2276

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 62110 (Completion Date 07/07/2025) and 58968 (Completion Date 05/12/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/07/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 388-78A-2630 Reporting abuse and neglect.

(1) The assisted living facility must ensure that each staff person:

- (a) Makes a report to the department's Aging and Disability Services Administration Complaint Resolution Unit hotline consistent with chapter 74.34 RCW in all cases where the staff person has reasonable cause to believe that abandonment, abuse, financial exploitation, or neglect of a vulnerable adult has occurred; and
- (b) Makes an immediate report to the appropriate law enforcement agency and the department consistent with chapter 74.34 RCW of all incidents of suspected sexual abuse or physical abuse of a resident.

The Department staff who did the On Site verification:

Teresa Pederson-Tuley, Nursing Consultant Institutional

If you have any questions, please contact me at (253)281-1245.

Sincerely,
Anthony Devito

Anthony Devito, Field Services Administrator
Region 2, Unit A
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: Brookdale Stanwood

Provider Type: Assisted Living Facility

License/Cert.#: 2276

Compliance Determination #: 58968

Intake ID: 175990

Investigator: Teresa Pederson-Tuley

Region/Unit #: RCS Region 2 / Unit A

Investigation Date(s): 05/02/2025 through 05/12/2025

Complainant Contact Date(s):

Allegation(s):

Identified Resident (IR) had injuries of unknown origin.

Investigation Methods:

Sample:	Total residents: 63 Resident sample size: 3 Closed records sample size: 0
Observations:	Residents Staff to resident interactions Resident rooms
Interviews:	Identified staff Nursing staff Family members
Record Reviews:	Medical records Staff training records Personnel files

Investigation Summary:

Review of investigative records and staff interviewed showed the facility staff found the IR, the nurse assessed the IR and the IR had been transported to the hospital for further treatment. The facility notified physician and family but failed to report to the hotline and make an immediate report to law enforcement. Citation issued at 388-78A-2630 (1)(a)(b).

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 #: 2276	Compliance Determination # 58968
Plan of Correction	Brookdale Stanwood	Completion Date
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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 05/02/2025 of:

Brookdale Stanwood
7212 265TH ST NW
STANWOOD, WA 98292

This document references the following complaint number(s): 175990

The following sample was selected for review during the unannounced on-site visit: 3 of 63 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Teresa Pederson-Tuley, Nursing Consultant Institutional

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit A
3906-172nd St NE, Suite #100
Arlington, WA 98223

Statement of Deficiencies

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Brookdale Stanwood

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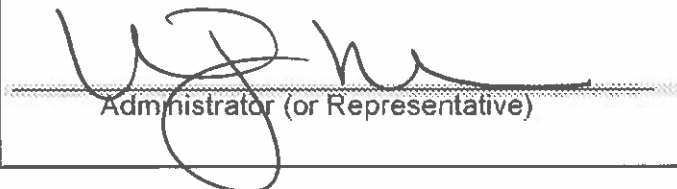
05/12/2025

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

5/12/2025
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)

5/13/25
Date

WAC 388-78A-2630 Reporting abuse and neglect.

(1) The assisted living facility must ensure that each staff person:

(a) Makes a report to the department's Aging and Disability Services Administration Complaint Resolution Unit hotline consistent with chapter 74.34 RCW in all cases where the staff person has reasonable cause to believe that abandonment, abuse, financial exploitation, or neglect of a vulnerable adult has occurred; and

(b) Makes an immediate report to the appropriate law enforcement agency and the department consistent with chapter 74.34 RCW of all incidents of suspected sexual abuse or physical abuse of a resident.

This requirement was not met as evidenced by:

Based on interview and record review the Assisted Living Facility (ALF) failed to report to the Complaint Resolution Unit (CRU) and law enforcement when there was reasonable cause to believe that 1 of 3 residents (Resident 1), had been abused. This failure placed Resident 1 and all ALF residents at risk of abuse.

Findings included...

Review of Revised Code of Washington 74.34.020 showed: (2) "Abuse" means the intentional, willful, or reckless action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult. In instances of abuse of a vulnerable adult who is unable to express or demonstrate physical harm, pain, or mental anguish, the abuse is presumed to cause physical harm, pain, or mental anguish. Abuse includes sexual abuse, mental abuse, physical abuse, and personal exploitation of a vulnerable adult, and improper use of restraint against a vulnerable adult which have the following meanings: (c) "Mental abuse" means an intentional, willful, or reckless verbal or nonverbal action that threatens, humiliates, harasses,

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coerces, intimidates, isolates, unreasonably confines, or punishes a vulnerable adult. Mental abuse may include ridiculing, yelling, or swearing

A review of the ALF policy titled Abuse, Neglect, Exploitation and Investigation, dated 01/2008, showed Brookdale at Home (BAH) is committed to maintaining a safe environment for clients, visitors and associates. Instances or allegations of abuse, neglect or exploitation should be treated seriously and should be reported to the Administrator or the supervisor on duty for investigation and appropriate follow-up. (1) External Reporting/Notification; (C) Report to the State, (d) Involvement of Law Enforcement-The Administrator or designee should notify local law enforcement when it appears that a crime has been committed within twenty-four (24) hours. (4) Internal Reporting/Notification, (a) Associate Obligations. Any associate who witnesses or becomes aware of the alleged abuse, neglect or exploitation, should report such an incident to the Administrator or supervisor on duty immediately.

Record review of Staff E, Registered Nurse (RN), training showed they received abuse, neglect and reporting education on 01/06/2025.

Record review of Staff D, Medication Technician (MT), training showed they received abuse, neglect and reporting education on 02/24/2025.

Record review of Staff C, Health and Wellness Director (HWD), training showed they received abuse, neglect and reporting education on 01/06/2025.

Record review of Staff B, Associate Executive Director (AED), training showed they received abuse, neglect and reporting education on 11/02/2024.

Resident 1

Resident 1 was admitted to the ALF on [REDACTED]/2025 with a diagnosis of [REDACTED]

Record review of Personal Service Plan (PSP) dated 01/07/2025 showed the resident needed medication assistance, skin was intact and without injury. The resident had difficulty communicating needs, not orientated to person or time, needed verbal prompts during daily routines and did not remember staff members' names.

On 05/02/2025 at 9:13 AM, Collateral Contact stated Resident 1 arrived at the emergency department with significant lacerations, bruising and trauma to their right rib cage. They were concerned Resident 1 had been assaulted and reported to the hotline.

On 05/02/2025 at 11:50 AM, Staff D stated they arrived at Resident 1's room to assist

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with morning medications. Staff D found the resident lying on their bed with bruises and lacerations on their body. Staff D stated that they had called the nurse. Staff D stated that the procedure for injury of unknown origin was to report to the hotline, call law enforcement. Staff D stated they did not report to the hotline or make an immediate report to law enforcement.

On 05/02/2025 at 12:15 PM Staff E stated they were called to the resident room by Staff D. Staff E stated that they found the resident lying on their bed with bruising, lacerations to their body. Staff E stated the procedure for injury of unknown origin was to report to the hotline and call law enforcement. They stated they did not report to the hotline or make an immediate report to law enforcement.

On 05/02/2025 at 12:30 PM Staff C stated they were notified of the incident, did not report to the hotline or make an immediate report to law enforcement.

On 05/02/2025 at 12:40 PM Staff B stated they were not notified of the incident and stated the procedure for injury of unknown origin was to report to the hotline, make an immediate report to law enforcement and notify management. They stated they did not report to the hotline or make an immediate report to law enforcement.

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 Stanwood is or will be in compliance with this law and / or regulation on (Date) 5/20/25.

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


Administrator (or Representative)

5/13/25
Date