



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

EMERITUS CORPORATION

Brookdale Monroe
15465 179TH AVE SE
MONROE, WA 98272

RE: Brookdale Monroe License # 2284

Dear Administrator:

This letter addresses Compliance Determination(s) 37709 (Completion Date 03/04/2024) and 34286 (Completion Date 01/10/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 03/04/2024 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-2730-1-b

The Department staff who did the on-site verification:
Michelle Mcglon, Nursing Consultant Institutional

If you have any questions, please contact me at (425)670-6070.

Sincerely,

Jamie Singer, Field Manager
Region 2, Unit J
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: Brookdale Monroe **Provider Type:** Assisted Living Facility
License/Cert.#: 2284
Compliance Determination #: 34286 **Intake ID:** 109622
Investigator: Michelle Mcglon **Region/Unit #:** RCS Region 2 / Unit J
Investigation Date(s): 12/21/2023 through 01/10/2024
Complainant Contact Date(s):

Allegation(s):

1. The Assisted Living Facility (ALF) had positive COVID residents.

Investigation Methods:

Sample:	Total residents: 57 Resident sample size: 2 Closed records sample size:
Observations:	Residents Identified resident Staff to resident interactions Resident to resident interactions
Interviews:	Identified resident Nursing staff Executive Director
Record Reviews:	Resident Records Line List RPP Policy

Investigation Summary:

1. Interview and record review showed the ALF failed to ensure the health care workers were fit tested for the appropriate face mask, prior to an outbreak. In an interview, Health and Wellness Director stated that she was not aware of the required fit-testing or Respiratory Protection Program. Record review of the ALF's policy showed the health care workers were required to have annual fit testing.

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 #: 2284	Compliance Determination # 34286
Plan of Correction	Brookdale Monroe	Completion Date
Page 1 of 3	Licensee: EMERITUS CORPORATION	01/10/2024

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 12/21/2023, 12/21/2023 and 12/21/2023 of:

Brookdale Monroe
15465 179TH AVE SE
MONROE, WA 98272

This document references the following complaint number(s): 109622, 108451, 111322

The following sample was selected for review during the unannounced on-site visit: 2 of 57 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Michelle Mcglon, Nursing Consultant Institutional

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2, Unit J
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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.

Jamie Singer
Residential Care Services

1/11/2024
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.

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

Statement of Deficiencies	License #: 2284	Compliance Determination # 34286
Plan of Correction	Brookdale Monroe	Completion Date
Page 2 of 3	Licensee: EMERITUS CORPORATION	01/10/2024

Administrator (or Representative)



Date 1.22.2024

WAC 388-78A-2730 Licensee's responsibilities.

(1) The assisted living facility licensee is responsible for:

(b) Complying at all times with the requirements of this chapter, chapter 18.20 RCW, and other applicable laws and rules; and

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to follow a Respiratory Protection Program (RPP) ensuring care staff wore fit-tested respiratory masks while providing care during a COVID outbreak. This failure placed 57 of 57 residents at risk for exposure to COVID-19 (is an infectious disease by a virus causing respiratory illness with symptoms including cough, fever, new or worsening malaise, headache, or new dizziness, nausea, vomiting, diarrhea, loss of taste or smell, and in severe cases difficulty breathing that could result in severe impairment or death).

Findings included...

NOTE: Washington Administrative Code (WAC) 296-842-12005 stated all long term-care facilities were required to develop and maintain a Respiratory Protection Program.

NOTE: Review of a "Dear Administrator" letter, dated 04/30/2021, showed the Department informed ALFs of their responsibility to develop and maintain an RPP. An RPP is defined by Department of Health as a "Federal and state OSHA (Occupational Safety and Health Administration) requirement to protect workers from exposure to respiratory hazards." The ALF were required to provide initial and annual fit-tests for each Health Care Worker (HCW) with the same model, style, and size respirator that the HCW would be required to wear for protection against COVID-19 and airborne hazards. The ALF were required to provide fit-tested respirators, such as NN95, to all HCWs with the potential to have contact with residents with known or suspected COVID-19. The ALF were required to provide gowns, gloves, and eye protection to staff who were providing care to residents.

Review of the ALF's policy titled, "Respiratory Protection Program", dated 01/15/2021, showed fit testing was an annual requirement. Qualitative fit testing would be performed for each associate and for each respirator the associate may wear. The associate must be fit tested (prior to initial use of the respirator) with same make, model, style, and size of respirator that would be used and at least annually thereafter. Fit testing shall occur before a respirator was assigned. The medical evaluation must be completed before the associate was fit tested or required to use the respirator in the workplace. All associates required to wear a respirator would complete the respiratory protection medical questionnaire.

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Plan of Correction	Brookdale Monroe	Completion Date
Page 3 of 3	Licensee: EMERITUS CORPORATION	01/10/2024

In an interview, on 12/21/2023 at 12:35 PM, Staff A (Health and Wellness Director) stated that she was not aware of the Respiratory Protection Program or the contents. Staff A stated that she had not been fit tested or requested to fill out a medical questionnaire. Staff A had been employed by the ALF since 09/20/2021.

In an interview, on 12/21/2023 at 12:46 PM, Staff B (Caregiver), stated that she had not been fit tested or filled out a medical questionnaire, since the summer of 2022. Staff B had been employed by the ALF since 04/10/2020.

In an interview, on 12/21/2023 at 12:49 PM, Staff C (Medication Technician), stated that he had not been fit tested. Staff C had been employed by the ALF since 09/25/2023.

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 Monroe is or will be in compliance with this law and / or regulation on (Date) 2/23/24.

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


Administrator (or Representative)

1/18/24
Date

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