



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
AGING AND LONG-TERM SUPPORT ADMINISTRATION  
**316 W Boone Ave., Suite 170, Spokane, WA 99201**

July 2, 2019

SULLIVAN VENTURES, LLC  
SULLIVAN PARK ASSISTED LIVING COMMUNITY  
S 421 ADAMS  
SPOKANE, WA 99216

RE: SULLIVAN PARK ASSISTED LIVING COMMUNITY License #1612

Dear Administrator:

The Department completed a follow-up inspection of your assisted living facility on July 1, 2019 for the deficiency or deficiencies cited in the report/s dated June 3, 2019 and found no deficiencies.

The Department staff who did the follow-up inspection:  
Theresa Kochevar, Licensor

If you have any questions please, contact me at (509) 323-7324.

Sincerely,

Susan Bergeron, Field Manager  
Region 1, Unit B  
Residential Care Services



**Residential Care Services  
Investigation Summary Report**

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**Provider/Facility:** SULLIVAN PARK ASSISTED LIVING COMMUNITY (686302)      **Intake ID(s):** 3653059  
**License/Cert. #:** AL1612  
**Investigator:** Soper, Michael      **Region/Unit:** RCS Region 1/Unit B      **Investigation Date(s):** 05/29/2019 through 06/03/2019  
**Complainant Contact Date(s):**

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**Allegations:**

1) The facility failed to report to the Department an allegation of stolen resident money.

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**Investigation Methods:**

**Sample:** 3 current residents.

**Observations:** General Environment. Resident abilities, comfort, & safety. Staff interactions with residents. Facility interventions to promote safety.

**Interviews:** Resident sample. 1 administrator. 1 caregiver.

**Record Reviews:** Assessments and care plans. Nursing notes. Investigation records.

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**Allegation Summary:**

1) Nursing notes showed the resident reported the missing money to staff on 04/26/19. The facility conducted an internal investigation on 04/28/19. The facility did not report the incident to the state as required.

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**Unalleged Violation(s):**       **Yes**       **No**

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**Conclusion / Action:**       **Failed Provider Practice Identified / Citation(s) Written**       **Failed Provider Practice Not Identified / No Citation Written**

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See Statement of Deficiencies dated 06/03/19. Citations were written under WAC 388-78A-2630-1-a Reporting Abuse and Neglect.

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



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316 W Boone Ave., Suite 170, Spokane, WA 99201

Statement of Deficiencies	License #: 1612	Completion Date
Plan of Correction	SULLIVAN PARK ASSISTED LIVING COMMUNITY	June 3, 2019
Page 1 of 3	Licensee: SULLIVAN VENTURES, LLC	

You are required to be in compliance at all times with all licensing laws and regulations to maintain your assisted living facility license.

This document references the following complaint number: 3653059

The department has completed data collection for the unannounced on-site complaint investigation on 5/29/2019 and 6/3/2019 of:

SULLIVAN PARK ASSISTED LIVING COMMUNITY  
S 421 ADAMS  
SPOKANE, WA 99216

The following sample was selected for review during the unannounced on-site complaint investigation : 3 of 45 current residents and 0 former residents.

The department staff that inspected and investigated the assisted living facility:  
Michael Soper, RN, NCI - Community Complaint Investigator

From:  
DSHS, Aging and Long-Term Support Administration  
Residential Care Services, Region 1, Unit B  
316 W Boone Ave., Suite 170  
Spokane, WA 99201  
(509)323-7324

As a result of the on-site complaint investigation 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.

*Eric Stein* for Sue Bergeron  
Residential Care Services

06/14/2019  
Date

I understand that to maintain an assisted living facility license I must be in compliance with all the licensing laws and regulations at all times.

*Chelsey Stealy, ED*  
Administrator (or Representative)

06/17/2019  
Date

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



Statement of Deficiencies	License #: 1612	Completion Date
Plan of Correction	SULLIVAN PARK ASSISTED LIVING COMMUNITY	June 3, 2019
Page 2 of 3	Licensee: SULLIVAN VENTURES, LLC	

**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

**This requirement was not met as evidenced by:**

Based on interview and record review, the facility failed to report to the Department Hotline when one of three resident's (Resident #1) was involved in an incident related to misappropriation of resident funds. This placed the resident at risk for continued misappropriation of resident funds.

**Findings included...**

A 04/11/19 assessment showed Resident #1 required assistance with managing her finances. A nursing note dated 04/26/19 showed the resident requested help searching for her money that was missing. Review of Department records showed no report was made to the Department Hotline related to Resident #1's missing money.

On 05/29/19 at 10:14 AM, Resident #1 stated that Staff B, a caregiver, had been terminated after it was discovered Staff B had stolen money from residents. Resident #1 stated she had \$80 go missing during the same time.

On 06/03/19 at 2:31 PM, Staff A, the administrator, stated that Resident #1 had reported missing money to facility staff and an internal investigation was done. Staff A advised the incident was not reported to local law enforcement or the Department Hotline.

The facility's investigation report, dated 04/29/19, showed Resident #1 reported missing \$60 to Staff A on 04/29/19 and that employee theft was suspected.



Statement of Deficiencies

License #: 1612

Completion Date

Plan of Correction

SULLIVAN PARK ASSISTED LIVING COMMUNITY

June 3, 2019

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Licensee: SULLIVAN VENTURES, LLC

**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, SULLIVAN PARK ASSISTED LIVING COMMUNITY is or will be in compliance with this law and / or regulation on (Date) 6/17/2019. In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

I understand that to maintain an assisted living facility license, the facility must be in compliance with the licensing laws and regulations at all times.

Chelsey Stealy  
Administrator (or Representative)

6/17/2019  
Date

## Plan of Correction for 5/29/19 and 6/3/2019

### Sullivan Park Assisted Living

WAC 388-78A-2630

(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.

#### Correction in place:

1. Executive Director will immediately report any reports or concerns of financial exploitation of any resident, whether founded or suspected to the complaint resolution unit hotline.
2. On 6/13/19 an all-staff meeting was called to discuss Mandated Reporting, the Department Hotline and how to make a report, and types of abuse.

Chelsey Staley, ED  
6/17/19