

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505476	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/26/2025
NAME OF PROVIDER OR SUPPLIER Bailey-Boushay House		STREET ADDRESS, CITY, STATE, ZIP CODE 2720 East Madison Seattle, WA 98112	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>47218</p> <p>Based on interview and record review, the facility failed to ensure allegations of abuse were reported timely to the State Agency for 1 of 3 residents (Residents 1), reviewed for abuse allegations. This failure placed the residents at risk for potential unidentified abuse and lack of protection from abuse.</p> <p>Findings included .</p> <p>Review of the facility's policy titled, Abuse and Neglect - Reporting and Investigating, updated in June 2024, showed that the facility employee was responsible to report suspicious incidents including sexual abuse to the State Hotline immediately.</p> <p>Review of the Nursing Home Guidelines, The Purple Book, dated October 2015 (sixth edition) showed, For the purposes of reporting abuse, abandonment, neglect, financial exploitation, sexual assault and physical assault, a nursing home employee (or other mandated reporter) is required to make a report if he or she has reasonable cause to believe the incident occurred. Examples of reasonable cause may include: the individual observes the incident or hears the victim state it happened; or the individual hears about an incident from a permissive reporter who has direct knowledge of the incident. It further showed, Federal law requires the facility to report all allegations of abuse or neglect. This would include taking seriously any allegation from residents or others with a history of making allegations.</p> <p>Review of Resident 1's Minimum Data Set (an assessment tool) showed they were cognitively intact.</p> <p>Review of Resident 1's incident investigation dated 02/10/2025 showed Resident 1 reported an allegation of abuse to Staff B, Social Worker, on 02/07/2025. Further review of the document showed that the facility reported the allegation of abuse to the State Agency on 02/10/2025, three days after the allegation was initially reported to Staff B.</p> <p>On 02/25/2025 at 12:10 PM, Resident 1 stated they reported to Staff B on Friday (02/07/2025) about the sexual allegation by their visitor on Wednesday [02/05/2025] or Thursday [02/06/2025] of that week.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A joint record review and interview on 02/26/2025 at 2:28 PM with Staff B, showed Resident 1's nursing progress note dated 02/07/2025 had documentation about Resident 1 reporting an allegation of sexual abuse to Staff B. Staff B stated that Resident 1 told them that a visitor had his way with Resident 1. Staff B further stated that they should have reported the allegation to the State Agency on 02/07/2025.</p> <p>On 02/26/2025 at 4:33 PM, Staff A, Assistant Director of Nursing, stated they expected allegations of sexual abuse to be reported to the State Agency immediately.</p> <p>Reference: (WAC) 388-97-0640 (5)(a)</p>		