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## Left in the Dust: How Staff at River Heights Assisted Living Facility Adjusts to Change and COVID-19

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## Left in the Dust:

How Staff at River Heights Assisted Living Facility Adjusts to Change and COVID-19

Victoria Hill

Fall, Spring Term 2019/2020

## Dedication

*Thank you to the management at “River Heights” for allowing me to intimately work with the staff and residents to understand both the struggles and victories of this line of work. I am touched by the dedication of the employees who constantly demonstrated patience and empathy to those in their care. Additionally, I am most grateful for the several employees in the Housekeeping Department who were open with their struggles, and their time training me on the position. I gained respect and appreciation for this department as my aching body attempted to keep up with their responsibilities. In the latter portion of my research, I became more acquainted with the caregivers who have shown their commitment to the residents and their well-being. Despite the internal and external pressures the staff faces, their perseverance in these ever-changing times has been truly inspiring to witness. Without the patience and honesty of the informants, my research would not be possible.*

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*Her curly hair bounced as she turned around and half-jogged back in the other direction towards the kitchen. I foolishly stood there, unsure exactly what it meant to “clean the dining room”. I looked around in panic before giving in and grabbing the bottle of disinfectant and pink rag. I began wiping down the rolling chairs; four per table, and 8 square tables which lined the room’s walls. I continually looked up from my dirtied rag as anxiety kept my heart racing, but felt moments of relief as I saw that curly hair and maroon shirt bob toward me through the slots in the partition wall. But she would continue down the corridor carrying boxes of supplies to and fro. The industrial dishwasher broke, she later told me, and the kitchen staff were supposed to start setting tables for lunch within the hour. “Is that part of your job - maintenance?”, I asked. Nancy shook her head, rolling her eyes especially slow: “what isn’t a part of our job around here. I don’t think people realize how much we bust our asses. Do you think I had time to help fix the dishwasher? How am I supposed to simultaneously clean the dining room, switch over the laundry, and clean rooms? Fuck today, good lord”. I sat with her in silence as we ate our lunches in the breakroom, and after a great pause and a deep sigh, she looked up from her phone and stated genuinely, “you are going to like it here, it’s a really easy job for the most part”. I chuckled slightly, and felt this was not the case.*

## Introduction

For eight months, I have observed and participated in the various responsibilities of the Housekeeping Department of “River Heights” – an Assisted Living Facility (ALF) and Mental Care Residence. Carson, the Housekeeping and Maintenance Director, was thrilled to have an anthropology student on staff because, as he tells me, he has always loved dinosaurs. After explaining my intentions of research to Carson and later his staff, he helped me through the training process in addition to getting CPR certified and a Food Handler’s License - requirements for any staff on the floor.

I am fortunate to have very healthy great-grandparents and grandparents, so I was unfamiliar with the harsh realities of aging. Many people in my own age group have expressed

negative attitudes towards the elderly and general discomfort of old age. I remember on the first day I walked around on a tour of River Heights, and a resident went outside to pick an apple from the courtyard for me, placing it in my hand. They said that it had the same dimples as me - a sweet for their sweet. I laughed and blushed, surprised by such kindness from a stranger. I owed it to at least this resident, to stick around to understand what exactly River Heights was like. One thing I would like to note is that River Heights is a pseudonym along with any names of the employee's mentioned throughout this project. Instead, the facility and its workers are based off of the popular teen sleuth "Nancy Drew" (see Character Map, Appendix) and assisting characters.

This is a qualitative ethnographic study that uses participant observation, formal and informal interviews, random sampling, textual analysis, and extra components in the form of poetry. My initial research questions at River Heights were aimed towards the Housekeeping Department and their ability to adequately function despite the unique job requirements and allowances that are dissimilar to other departments. At the time, the department was only four workers: two full-time and two part-time. I evaluated how each individual exists within this flexibility. Fast forward five months from the end of 2019 to mid-2020, and the department has doubled in size which allows for someone on staff to always be available in housekeeping emergencies. The initial six weeks were spent on the Samish Wing of River Heights in housekeeping but have since shifted to the Padden Wing in laundry and housekeeping. This has provided me with a holistic understanding of my department and the entire building. After the six weeks were over, Carson offered me a job and I have been employed at the facility ever since. Now I return to my anthropological sleuthing as I attempt to answer the question of: how are the

expectations of River Heights' workers affecting the quality and quantity of general care, and how is the quality and quantity of care impacted in times of change?

*From one Maze to the Next: Spatial Analysis of River Heights*

As I have heard every visitor say as they attempt to navigate River Heights – the building is an endless maze. It is composed of two wings, the “Samish” and “Padden”. Both are similar in design and function: housing 76 residents in 59 rooms (one is now designated for quarantine), a dining and activity room, a family room, and a laundry room and housekeeping closet (see Figure 1a and 1b). There is one kitchen on the Samish side, and a bistro and conference room on the Padden side in lieu of a kitchen. Each dining room leads to a grassy courtyard; they are abundant in plants and greenery. Normally employees enter through the screen door in the back of the kitchen, and guests enter through the locked and monitored front door. However, because of safety precautions with COVID-19, all family and care provider “visits” are held through Zoom or on the phone.

Now, employees wash their hands at a temporary, bright blue handwashing station outside with various bold, red-lettered signs plastered on it saying handwashing is required with no exceptions. The front door is still alarmed and the receptionist on duty buzzes you in and immediately takes your temperature. The thermometer is constantly faltering, and often reads at dangerously low temperatures regardless of the forehead. Every employee has sign-in sheets in an over-flowing binder where a series of questions are asked about COVID-19 related symptoms. When this is complete and depending on the availability, a cloth or one-time-use mask is given to you before entering the next guarded door into the facility itself.

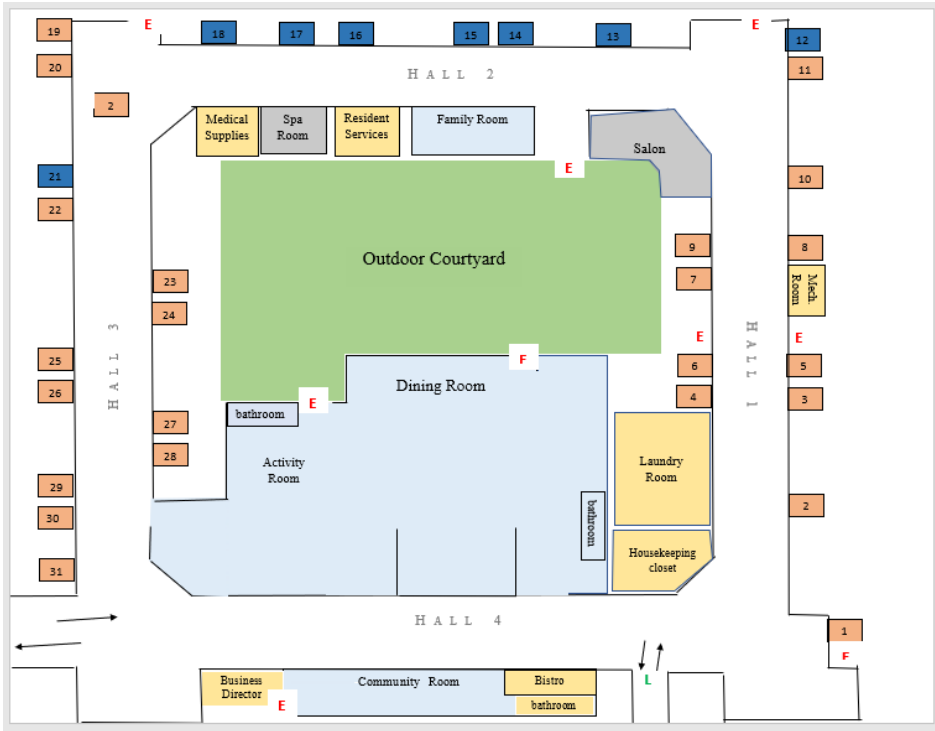


Figure 1a: Padden Wing Layout

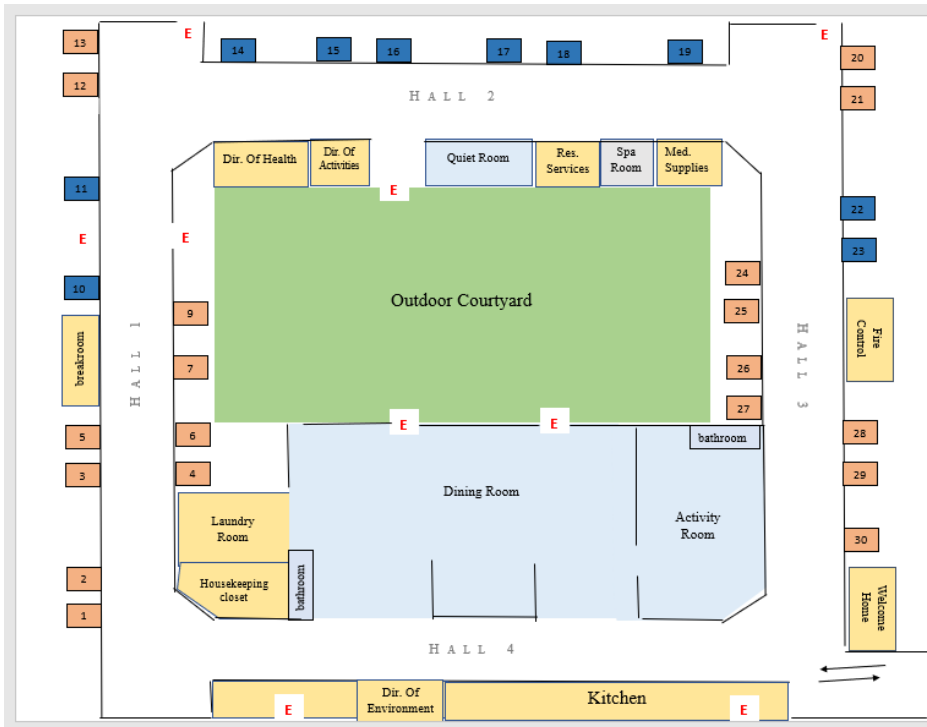


Figure 1b: Samish Wing Layout

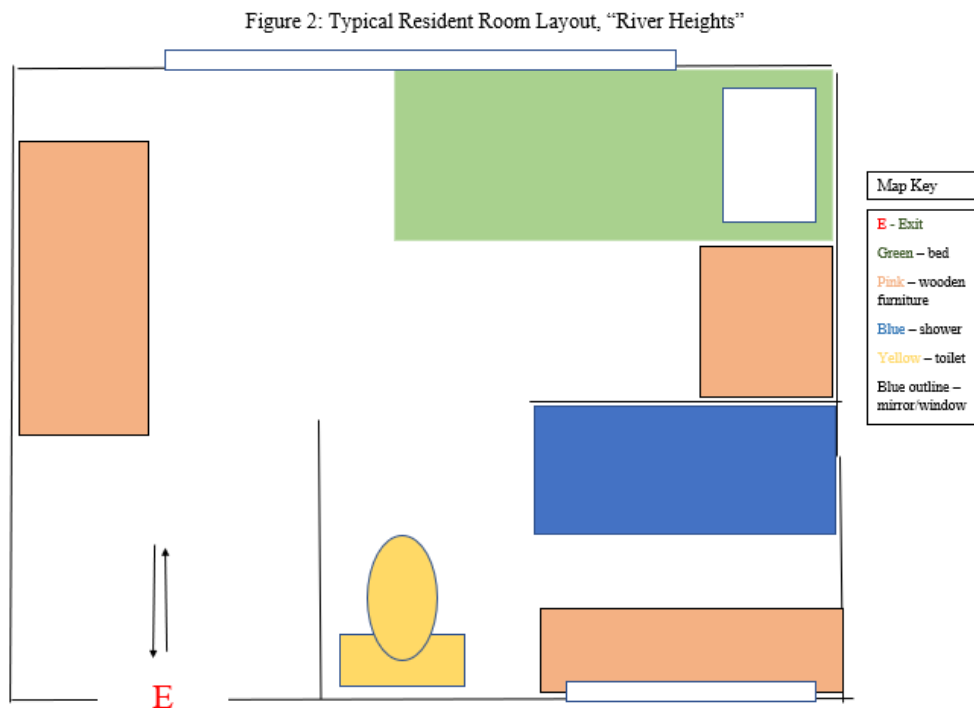
| Map Key  |                           |
|----------|---------------------------|
|          | Resident supervised areas |
|          | Resident accessible areas |
|          | Double-occupancy rooms    |
|          | Single-occupancy rooms    |
|          | Employees only areas      |
|          | Outdoor areas             |
| <b>E</b> | Exit doors                |
| <b>L</b> | Lobby exit                |
|          | Main entrance/exit        |



There are approximately 30 paintings on the walls which feel like trail markers or instructions on a pirate's map: at the vintage painting of women playing piano, take a left and pass through the white archway, towards the picture of the koi fish to the right of the activity room, and so on and so on. The hallways are lined with the rectangular artwork on either side, a chair rail on the left side of the hallways, and on the right is a white ledge which functions as a more aesthetically pleasing handrail – one of many state requirements (WA 388-78A-3080). Above these features, the walls are painted a sunny yellow, and below the railing, is an uneven coat of pea green. Besides the dining rooms, there is uniform “hotel” carpeting throughout the common areas, consisting of a dark green background with a multicolored red and blue swirls. Some resident rooms have been recently updated with wood flooring but whomever installed it did so before the walls were painted, and white drip marks litter the floors. Other rooms are dated with light brown or light green carpeting that is stained from years of damages.

The windows and sills are white, with clear fabric window shades that allow for natural light. All windows only open an inch and a half because of a black screw drilled in the tracks. Fingerprints line the glass doors and windows, and are replaced almost immediately with more the moment you turn away from cleaning them. The doors to the halls are white, industrial metal with handles that push open. The breezeway doors that connect the two sides of the building are now shut with bold signs that say, “DO NOT ENTER” – an ineffective guard against residents who walk to and from both sides of the building. The residents' doors are white and wooden, and get scuffed up from wheelchairs and walkers. The design of the resident rooms are very similar to each other (see Figure 2): there is a window, a wooden wardrobe on the wall closest to the door, there is a nightstand with a lamp, a bed and bedframe, a bathroom with a toilet, above-toilet locked cabinet, a sink, a below-sink cabinet, a mirror, soap and paper towel dispensers to

the right of the mirror, and a standing shower. In double-occupancy rooms, there is another bed and wardrobe but shared bathroom space. A blue call button is installed in the bathroom and by the room door for residents to push if caregiver assistance is required.



## Law and Background Research

According to the 2015<sup>th</sup> Edition of the Compendium of Residential Care and Assisted Living Regulations and Policy, the term “assisted living” has many meanings. It is more easily recognized as a facility housing a minimum of seven residents and has the intent or implied purpose of, “providing housing and basic services, and assuming general responsibility for the safety and well-being of the residents”. Assisted living is different from independent senior living houses, communities, and continuing retirement communities according to the United States Department of Housing and Urban Development. There are certain levels of caregiving standards in a long-term capacity that make the category of assisted living distinct from other old age homes (Rowles, et al., 2004.).

The Washington State Department of Social and Human Services lists reports of Assisted Living Facilities (ALF) where laws were violated, and/or an individual made complaints to the state. Visitors, caregivers, outside consultants, and other staff are given rights to “whistle blow” on facilities where there is quality concern. These reports are anonymous, and state investigators are sent in to examine claims with random sampling. The inspector who is sent to review the ALF then publishes any findings for public knowledge. The most recent report for River Heights during my initial investigation was filed in March of 2018 which violated WA 388-78A-2170 regarding housekeeping standards. The issues within this report is detailed below.

Out of the approximately 60 rooms in River Heights, ten rooms were sampled, and half of which were deemed unsatisfactory. Residents A-E had various problems, though mostly reported urine smells, mysterious dried substances, and soiled, unchanged sheets. A housekeeping attendant referred to as “J” stated that they were aware of these issues in the morning of her shift, and either was not able to get around to the rooms or was too busy to attend to the issues. The investigation lead to a laundry schedule for housekeepers to be created by the Housekeeping and Maintenance Director, and the investigator requested all rooms to be cleaned following the results (“ALF”, 2018).

A manual published by the Washington State Society of Healthcare Attorney’s Long-Term Care Facility Health Law Counsel lists various laws for reference to allow families to get a better understanding of the quality expectations in ALF. In regard to housekeeping services, utility rooms, linen storage rooms, housekeeping services, and janitor’s closets are mandatory in every facility (Rose, et al., 2008). Chemicals and hazards need to be separately housed and labeled, particularly away from medicinal supplies. Equipment also needs to be housed in a way that does not affect the caregiving staff or resident’s negatively. Additionally, water needs to be

at 110 degrees Fahrenheit, with a grace zone of 10 degrees plus or minus this requirement. Water temperatures for laundry need to reach 160 degrees Fahrenheit for 5 minutes, or 140 degrees Fahrenheit for 15 minutes in order to properly disinfect. These State requirements go on and on, but are more easily summed as maintaining, “sanitary, orderly, and comfortable interior including keeping room temperatures at comfortable and safe levels” (Rose, et al., 2008). Of listed Washington State Laws specifically regarding ALFs, there are 11 noteworthy laws that apply to housekeeping standards and sanitation requirements (see Appendix).

Apart from law, there is the psychological relationship between a clean environment and improved mental health. A key figure in my fieldwork has repeatedly mentioned their assumed knowledge of how cleaning improves the health of residence: “make sure to open the windows, flush the toilets, and turn on fans in every room as you clean to help the [resident’s] lungs feel better”. In terms of mental illness in the scientific community, “environment” is a definition that includes everything except the human gene. When the influencing factors of one’s environment are confirmed, there is the ability to prevent the negatively affecting agents of the environment to lower their risk and “morbidity”. Factors can include actual effects of environment such as noise and chemical pollutants, but also thoughts, behaviors, and feelings generated by physical surroundings (“Legislature”, 2019).

To some degree, the housekeeper I closely shadowed was right. Opening windows and allowing proper ventilation of the rooms is beneficial to the residents and the staff. Allergens like dust and pollen can be embedded in the carpeting; dust can accumulate on trims and sills; and food or other items can fall under beds and produce foul odors or mold. Regarding mental illness, residents are not always aware of their surroundings, but depression, anxiety, and confusion are common traits of Alzheimer’s and dementia patients. These degenerative diseases

cannot be improved through changes of physical environment. However, having an environment that does not further agitate stress and emotion is key in creating a resident's "baseline". Being exposed to an environment with toxins and stimuli that can cause anxiety or trigger memory - both in a traumatic sense and in semi-cognitive cycles- affects the overall health of the patient. These need to be taken into account and controlled (Schmidt, 2007).

### *Partners in Grime: Roles of the Housekeeping Department*

From my very first encounters on the floor, it was made clear that the Housekeeping Department is an anomalous department at River Heights. While all departments have state requirements and a certain quality needs to be met, this department has the least hoops to jump through since direct care is not a concern. Caregivers are constantly pressured by management to fulfill their duties in a particular and timely fashion while executing the most exemplary bedside manner. But for housekeeping, as long as every room and common area (see Figure 3), on both the Padden and Samish Wings are cleaned once a week and there is no remaining laundry to be washed or distributed at the end of the day, there will be no significant issues. Though housekeeping constantly engages with residents, there is no particular approach or script that needs to be utilized so long as employees are civil.

Caregivers, management, and kitchen staff all need to take breaks at staggered times to be available to residents and employees, but housekeeping has an entirely flexible schedule. Laundry attendants need to be at work by 10 AM every day in order to clean the dining room after breakfast service, and should not leave until the dining room is cleaned after lunch service around 1 or 2 PM. Housekeeping has no time specifications; though it is helpful to have access to the rooms. This means ideally a housekeeper should start no earlier than the breakfast service at 8 AM, and leave no later than dinner service at 6 PM as residents start to become more reclusive

around these hours. If there are personal matters like picking kids up from school or going to appointments that interfere with the work schedule, Carson is always willing to make exceptions. The biggest culprit taking advantage of this rule is Ned in Padden Wing laundry who stays for just four-hour shifts. Much of his tasks fall either on Nancy who works in laundry the next day, or if I finish early, I will attempt to catch up on laundry.

**Figure 3: Parts of Common Areas to Clean, Housekeeping Department**

| <b>Required Cleaning by Department</b> |                                      |                       |                     |                     |                 |                       |                |               |
|--|--------------------------------------|-----------------------|---------------------|---------------------|-----------------|-----------------------|----------------|---------------|
| <b>Department</b>                      | <b>Dimensions of Contrast: Areas</b> |                       |                     |                     |                 |                       |                |               |
|  | <b>Restocking</b>                    | <b>Resident Rooms</b> | <b>Dining Rooms</b> | <b>Common Areas</b> | <b>Hallways</b> | <b>Activity Rooms</b> | <b>Kitchen</b> | <b>Bistro</b> |
| <b>Housekeeping</b>                    | <b>X</b>                             | <b>X</b>              | <b>X</b>            | <b>X</b>            | <b>X</b>        | <b>X</b>              |                | <b>X</b>      |
| <b>Laundry</b>                         |                                      |                       | <b>X</b>            |                     |                 | <b>X</b>              |                | <b>X</b>      |
| <b>Kitchen</b>                         |                                      |                       |                     |                     |                 |                       | <b>X</b>       |               |
| <b>Caregivers</b>                      |                                      |                       | <b>X</b>            |                     |                 |                       |                |               |

Despite the belief of other employees that housekeeping is a breeze, the duties can be physically demanding and requires a strong stomach. On my very first day, I was sent to clean up a trail of feces that spanned the entire Samish Wing and was pulled away to unclog a toilet that was jammed with approximately 25 individual packs of coffee creamer. Additionally, my initial hours spent at my field site were particularly difficult times for the company: a new management corporation, Horizons Management, bought the facility so there were many changes being made in addition to employee turnover within the department. Nancy told me in our interviews that a full-time housekeeper on the Samish Wing was fired for sexual harassment as they followed the

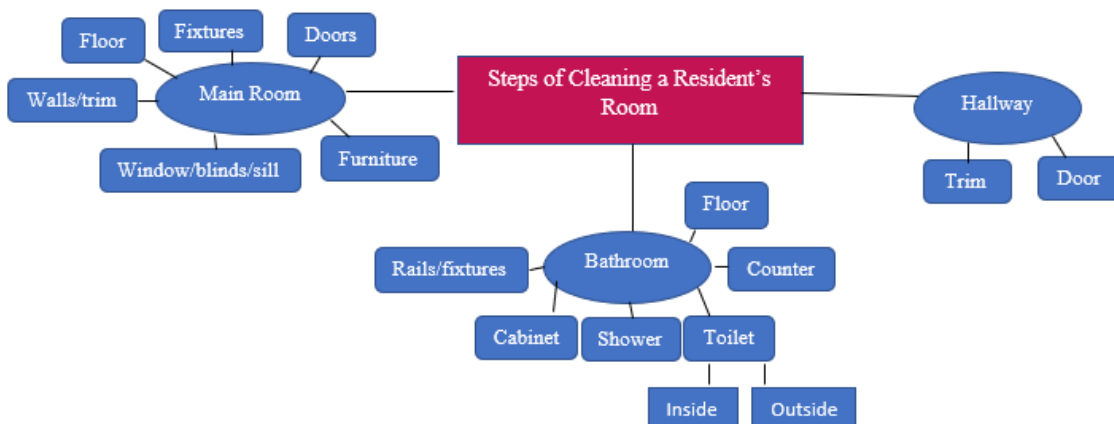
female caregivers around all day. By the time management caught on, the Samish Wing was in need of some tough love. And as a result, the first month or so at River Heights my body struggled to catch up with the physical demands of the job:

*My body hasn't been able to keep up lately. I feel as if no matter how long my break is, the aches span over my whole body. It wasn't just needing to take weight off my feet; it was my back and muscles. While scrubbing the trim, my hand would cramp in a scrubbing motion, and the rest of the day if I had unconsciously positioned my hand that way, the muscles would weaken and spasm.*

*My knees ached from crouching so long, and I tied my apron too tight. With the scrubbing and flexing movements, little patches of red are left on my skin. My black work pants collected dust and pieces of debris. My left hand has a callous building over my index finger's knuckle from the sweat and humidity inside my clear latex gloves and the scrubbing. I physically sweat so much from the activity that I wear a shirt underneath my work shirt, so my uniform doesn't become gross. I occasionally have to wipe my forehead, so I am not ill-presented; when I take breaks, I dab myself with a paper towel, so I am not a shiny mess. Others don't appear to look this way....*

Once all thirty resident rooms on the Samish Wing were deep cleaned (see Figure 4) – an assignment that took Nancy and I about three weeks to accomplish – the workload lightened. Instead of taking us an hour to clean a room top to bottom, we just maintained its quality which took roughly 20 minutes. Nancy would always take the bathroom, which left me to clean the common room.

**Figure 4: Resident Room Cleans**



*Nancy: full-time Padden Wing laundry attendant*

Nancy is constantly referred to as the most dedicated employee within the department and tries exceedingly so to keep the laundry and housekeeping to her standard. In March of 2020, she was named employee of the year and represents the expectations of the entire corporation – Nancy received an engraved glass plaque and company sweater that she proudly sports around the building. If there is a moment to spare, she endeavors in deep cleaning residents’ room or assists Carson with his duties. If there is any slack in the department, it often falls on her plate. In an interview with Nancy, a few minutes was spent with her pulling up photos she took on her phone of some of the best examples of the worst work of Ned and Frank. The images showed trim heavily coated with fuzzy dust or stained with mystery substances, and laundry backed up and not delivered over the weekend. All work, again, that she was required to then complete.

She tells me, “if it wasn’t for you finishing Samish early last weekend, I would have had to stay two hours over on my shift and do the laundry...It is so ridiculous what I have to go through sometimes to finish their jobs before I can even get to mine. I hate having to bring the



guilt of unfinished work home with me. I've learned to 'leave the garbage in the can', so to speak". This phrase is one she coined to mean that one cannot do everything necessary in a shift; that sometimes it requires you to go home knowing full well that there is work still waiting to be finished. Nancy is an extremely responsible and dependable employee: only once since my fieldwork started has she called out, and twice I worked half-days for her in order for her to handle her children's various activities and appointments.

Since the outbreak, there are many positions available at our facility as some employees have expressed their desire to limit risk of exposure to Coronavirus. Nancy's father is now employed as a full-time cook on the Samish Wing, and Nancy's youngest sister is a weekend caregiver-in-training on the Padden Wing. Nancy's sister briefly mentioned the family's involvement in other nursing homes and are all very passionate about volunteerism and particularly ensuring the proper treatment of the elderly. Nancy expressed concern over her sister being employed as a caregiver – worried that, "this place will certainly affect her".

*Frank: part-time Samish Wing laundry attendant, Padden Wing housekeeping*

"Hey Victoria! Nice to meet you! Do you believe in ghosts?". This was my first conversation with Frank. Down the hallway, I observed Joe shaking his head as he threw his hands up in exasperation. A resident had just passed in a room close by, and Frank swore the ghost could be spotted wandering the halls. Though these two employees are ceaselessly bumping heads, they are brought up conjointly in conversation either to discuss their reaction to each other in the latest squabble, or to analyze the wanting quality of their combined work. In an interview, Frank explained how both he and Joe were formerly employed as janitors at St. Joseph's Hospital in Bellingham a few years back. Joe retired from the hospital, but due to

personal circumstances had applied for employment in the Housekeeping Department at River Heights. He later recommended the position to Frank who was also searching for employment.

Ever since Nancy can recall, Frank and Joe bicker like “high school queen bees”. They complain about each other to Carson constantly; to the point where both implore me to get involved and express “new” information to Carson on their behalf. I nod and tell them I am on their side, but never go so far as to get in the middle of these disputes. The reason why Joe dislikes Frank to such extent is because when Joe moved to Samish laundry, Frank took over on Samish housekeeping. Joe claims he only vaguely knew of Frank before his employment at River Heights, but now realizes Frank’s “crazy lack of work ethic”.

Frank walks around the hallways to kill time, and will frequently stop by my housekeeping cart, telling me, “Victoria! Victoria, you must learn to relax!”. Joe reports that on his days off when Frank takes over on Samish laundry, he constantly places the linens on the wrong racks, fails to deliver the clean clothes at the end of a shift, and leaves dirty laundry needing to be washed. The Samish Wing is pint-sized in comparison to the Padden Wing, so Samish staff are generally finished for the day in a relatively shorter period with laundry and additional tasks than the Padden Wing staff (see Figure 5). In fact on the weekend, caregivers from Padden Wing will come over to the Samish Wing and take clean linens that Ned otherwise neglected to start a load of. But on Joe’s days off, the laundry from Samish Wing is drastically behind schedule.

Frank is constantly taking breaks; avoiding the workload by walking around the multitude of wings in the building to chat up employees. In our interview, he presented me with pictures of a pharmacy his family is constructing in the Philippines. I asked Joe about this business, and he shook his head, saying that every employee has seen those same pictures - so

much so that he could describe it in detail with his eyes closed. Additionally, claiming that Frank stops everyone in their tracks to reel them in with his “personal life drama”.

In February 2020, Frank quit after months of threatening to do so. In part this was because of a group of female coworkers reported his behavior to management. He would often invent situations to talk to the female employees: with myself on several occasions Frank planted residents’ clothing in the laundry room I was stationed in to have a valid reason for me to go to the Samish Wing and engage with him. Residents’ closed are seldom mixed up, but days Frank would work, I would need to return clothes to the Samish laundry room several times.

Frank would stand really close to me, blocking the laundry room door, and talk in a hushed voice. He would repeat with confidence how there was not a single employee that is doing their job, and heavily implying that he is the single most exceptional worker at River Heights. Several times he has inquired if I were seeing anyone romantically, but before I could answer, he would state that I am too young for such a thing. In the same breath, Frank would invite me on his next vacation, or suggest I FaceTime his wife in the breakroom with him. Other employees reported Frank going to their cars on the evening shift while they sat on break and attempted to sit with them in their vehicles. Management confronted Frank, and he quit days after.

**Figure 5: Tasks of a Laundry Attendant**

| Figure Key |                                     |
|------------|-------------------------------------|
| Green      | Laundry attendant duties            |
| Blue       | Duties also performed by caregivers |



*Joe: full-time Samish laundry attendant*

Joe is still employed at River Heights, but also keeps threatening to quit; he dreams out loud of the desire to retire soon. He reports the daily physical stress on his aging, sore body from a life filled with cleaning jobs. With the stay-at-home order in effect, most of Joe's and I's interactions involve him stating that the new laundry attendants do not know their job duties and how he wants nothing more than to go to the casino and drink a Corona. In his laundry room, Joe plays classic rock from the partly broken radio that is covered in black electrical tape. Sometimes the radio will turn on without obvious cause and startle any worker in the laundry room. Once or twice I have had to help Joe understand how Facebook works, especially the block feature. Despite being married, Joe often complains about the trouble he ends up in with the ladies.

After my initial research, Joe, a medical technician, and myself would bring in home-cooked food for each other on the Sunday's when we would work together on the Samish Wing. Since then, the med tech and myself have been promoted, and Joe is often asking one of us if we have talked to or seen the other. It is apparent that Joe is stuck in his own definition of "the good old days" and has a problem adjusting with change in personnel or routine. Since the virus has become more prominent, corporate has required housekeeping to up its standards as a safety precaution. One of the ways this implemented is through the twice daily disinfecting of all common surfaces (such as doors, windowsills, railings, bathroom counters, etc.) and rooms of residents who are reported sick with any symptoms whether potentially COVID-19 related or not. This takes roughly 15 minutes of generally misting the disinfectant and letting it air dry – a task that requires a whole bottle of cleaner. Despite many conversations about this new assignment, Joe struggles to change his routine. This resulted in the creation of a log that requires date and time signatures to ensure that people (namely Joe) are being held accountable of this

task. Additionally, if housekeeping is required in a room (ex: the carpet is soiled), Joe will begrudgingly complete the task. While emergency housekeeping is within his job description, since it is not a normal task that is consistently required in his average day, it will lead to a week or so of Joe complaining to the various housekeepers how the Samish Wing is in disrepair. While Joe is always in attendance, Carson does not rely on Joe to do an exceptional job, but the bare minimum. Joe comes in at 6AM well before the dirty laundry is brought in by the morning shift, and leaves just after he cleans the dining room after lunch service.

*Ned: part-time Padden Wing laundry attendant*

Ned also quit shortly after my initial research. As an employee, he was rarely in attendance; calling out consistently in a pattern of three weeks in a row, then the following weekend working four-hour shifts just to leave after the Padden dining room is cleaned. On more than one occasion, Ned would approach me in the Samish Wing and ask me to cover for him to leave early. Carson reports that he suffers from an unknown health problem and his work philosophy is to work as little as is required of him. Ned would arrive with classic red eyes and the smell of skunk wafting about him – Nancy coined the term “Ned red” to illustrate the irresponsible and carefree nature that she found in him and many other employees at the facility.

I had very few interactions with Ned because we worked on opposite sides of the building, him frequently starting shifts late and leaving early, and I had never acquired his cellphone number or engaged in conversation like I was able to with other workers. The quality and quantity of his work was lacking; taking advantage of the flexibility Carson promises which ultimately stunted the department from its ideal performance. Unlike most companies I have worked for, River Heights has no call-out policy which prevents employees who are habitually

absent from being held responsible or even terminated. Carson has since explained to me that all hiring and firing goes through corporate, so the only way Carson can “fire” someone other than evidence of their use of drugs or stealing a resident’s possession, is by slashing their hours drastically until they are forced to quit. For this reason, Carson was unable to take charge of his department and fire Ned, who, as Carson has repeatedly stated, was “dead weight”. I have since taken Ned’s position as the weekend Padden Wing laundry attendant.

*Carson: full-time Maintenance and Housekeeping Director*

Carson is a man who wears many hats. I will catch him running around in the hallways, repairing drywall, helping state inspectors, shampooing carpets - you name it. An essential, explicit and tacit theme in the Housekeeping Department is through his repeated words: “if you do your work, I will leave you alone”. A high level of trust is required to do your job efficiently without supervision, and in Caron’s case, he is often too busy that micro-managing is simply not an option. To various extents, employees take advantage of this system as it lacks high accountability and is greatly caters to the desires of the employees. Carson promised flexibility to me in training in order to seem accommodating and ensuring that the job could be accomplished – even if not in a timely fashion.

Since my initial research, Carson and I have reached immense mutual respect. He no longer hesitates to share information like confrontations with a problematic worker or issues that result in him being morally and ethically bound to report to the state. Carson essentially places me as housekeeping quality assurance on both wings of the building. My previous employment history involves professional commercial housekeeping, and he utilizes my time for room checks, new employee training, and general cleaning. Most recently, I was tasked with reporting

the work of an employee Carson suspected needed to be “let go” (their hours diminished). He has grown to trust me as my initial field research benefitted the department, and I am a housekeeper that has stuck around the longest in an otherwise short-term industry. The other day, Carson approached me with a silver jagged key – the one to his office. The “office” is most similar to the size of the housekeeping closets and is overflowing with maintenance equipment, keys to various doors throughout the facility, and extra housekeeping products. Here, I leave my schedules, my punch time sheets, and any notes in regard to inspections of incidents with residents, caregivers, or housekeeping.

### *Theme Identification*

There are three themes that I have identified in this department that interact and manifest in the forms of perceived laziness due to its unique job requirements and allowances. Housekeeping has a unique authority of being anywhere in the building at any time of day, and being able to use cellphones on the floor. Other departments have pagers or walkie talkies, and some don't need to communicate with each other outside of their assigned areas (ex: the kitchen). However, housekeeping needs to communicate frequently, and it is excessively taxing to wander around the building in an attempt to locate someone. Carson does not specifically say that cellphones are permitted, but it is a tacit theme that the departments tends to take advantage of this rule. Joe will play music in the Samish laundry room, Nancy leaves a phone charger in the Padden laundry room so she can play games or call her children at work, and Frank is constantly either Skyping family in the Philippines, or showing pictures of their business.

Caregivers make snide complaints that the Housekeeping Department is lazy, with passive commentary like, “oh, *they* still work here?”. A possible explanation for a negative

opinion of the department is due to the inconsistency of pace in an average day. The first and last hours of a shift, laundry attendants are running around non-stop in attempts to clean common areas or fold and deliver the remaining loads of laundry. Housekeepers are constantly disappearing in and out of rooms down several halls, so it is hard to spot these workers unless the bright yellow maids cart is left in the hall. So, if a laundry attendant is often spotted sitting on the folding counter in the laundry room waiting for a load to finish drying and on their phone while caregivers are on their feet working, the perception of a lazy department builds quickly and with resentment.

Lastly, on weekends there is no management of any kind. There is still a hierarchical system, but no bosses, supervisors, managers, what have you. The environment on the weekend as a result can be chaotic and have few limitations. A point of contention between housekeepers and caregivers is that the former have free range throughout the week. Carson's explicit saying "I'll leave you alone if you do your job" leads to some employees coming in with tattoos exposed, piercings or body jewelry worn, name tag or uniforms are missing, etc. Therefore, the weekend is the caregivers' only time to stray from management's expectations whereas housekeepers are seldom reprimanded and accustomed to this privilege. These days in particular highlight the relationship between employees and management. Both in their own rules regarding self-accountability, but also in general strictness that employees would deviate so drastically from normal behavior on manager-less days. During the virus outbreak, another example of deviation from tendency is that many staff members on the weekends do not wear cloth or one-time use masks whereas during the week. Yet, any staff that is not wearing one of these during the week is written up by management. Unlike the other examples, this is an unfortunate expression of individualism that puts the residents' safety at risk.



*Three's a Crowd: Care, Cleaning, and Covid-19 Updates*

Although the first few months during my initial research were not entirely easygoing, it is currently a turbulent time for the company and even more broadly the world as a whole. After my field course at Western Washington University, the two more problematic housekeepers quit: Ned and Frank. The Housekeeping Department has doubled in size, but Carson still views me as his top-ranking employee next to Nancy. This has its perks in the form of a raise and mutual respect. However, this new respect comes with its share of negatives. It is a common opinion within the department that the caregivers are lazy, over-talkative, and short with the residents. While this was at first minor observations, COVID-19 has heightened the slow-growing tensions between the Caregiving and Housekeeping Departments and exposing flaws between the two. Nancy, Carson, and I are on the floor most often and unfortunately have witnessed a lot of transgressions. Carson now is trusting me as a worker and a confidante, filling me in on the issues that the company is facing – often in the form of management. I will admit that being so personally affected by the issues I face on the floor; it can be hard to refrain from bias. While I will address key issues with the care team, I realize that my department is not scot free.

At the beginning of my research I noted that the facility was in a state of disarray as the previous housekeeper had neglected all of their duties for weeks on end. Both sides of the facility were in need of TLC, and it was not by any means a quick or easy task to return the housekeeping quality to state standards. My ethnography and the variety of charts and graphs provided were simplified into a training manual for new housekeepers in order to ensure thorough, honest cleaning methods. While that was not an intended result for my work, I was honored to have anything I had to offer bring about positive change within the company. And

with that, my intention for continuing this ethnography in mind, I will explain the tension between care staff and housekeepers.

I do not get to work intimately with caregivers the way I have been observing and now employed as a housekeeper. Despite this, I have several informants that helped me gather data. Going by pseudonyms, their names are Gabe, Harriet, McKenna, and Daina. Through survey methods and sampling, we collected the following data of the Care Department: there are 43 full-time and part-time caregivers ranging from 20-58 years of age though the average age is 26. With few exceptions the care staff is entirely female-identifying, and high school graduates or college degree-seeking students. These caregivers are typically on a set schedule, taking one or more of the four shifts a day: morning (6 AM-2:30 PM), swing (12 PM-8:30 PM), evening (2:30 PM-10:30PM), and “noc” (10:30 PM – 6:30 AM). There are more caregivers on the morning shift and the fewest on noc shift in order to accommodate the needs of the residents appropriately. Caregivers regardless of employment history are all paid minimum wage, and the average caregiver works 38 hours a week. On the flip side, housekeepers and laundry attendants are paid on average \$14.50 an hour and work an average 30 hours a week.

There is a tendency for weekend caregivers to call out frequently, and this requires the remaining caregivers on that wing to fill in for this employee. Normally there are three caregivers – one per hall which is approximately 10 rooms or 10 people depending on the hall. So, if someone calls out, that means per caregiver there is 50% more work to complete by making sure these five additional residents are fed, bathed, changed, the beds remade, and bathrooms restocked, in addition to general monitoring. It should not be any surprise when I therefore state that caregivers are over-worked. At facilities that offer higher wages, there is normally five to eight residents per caregiver. River Heights offers the lowest wages compared to

the county's other Assisted Living Facilities (ALFs) in order to increase profit margins. With this tendency to call out of work in addition to the meager wage their labor is bought at, at least once a week I will be folding laundry only to have a caregiver lean against the closed laundry room door and sigh, cry, or let out a fitful scream at the day's frustrations.

In all departments, COVID-19 has put enormous strain on staffing. In the Housekeeping Department, one part-time employee was let go because of their affiliation with another care facility, and both employers agreed that for safety's sake, this worker should only be exposed to one or the other. But in the Care Department, eleven employees out of 43 have temporarily quit, outright quit, or been fired during the past few months. While there is still enough caregiving staff to cover the basic needs of the residents, unfortunately that is all that can be met. Additionally, the two new management figures are for Care Services and the facility administrator. While in their previous positions these individuals were otherwise qualified, the lack of training due to COVID-19 in addition to the lack of accountability that family members and care providers hold us to upon visiting has led our facility into pandemonium.

Since the corporation running our facility, Horizons Management, has been upping safety precautions starting in February 2020, hostility between the Care Department and Housekeeping can be likened to the Hatfield's the McCoy's. When the slightest incident happens, the other party is too quick to point fingers at the other. Say for example a resident soiled themselves and a caregiver finds them in the hallway and brings them back to their room to change them. If there is any urine in the hallway or the resident's room, the caregiver fails to communicate with housekeeping about the issue, so it does not get cleaned up. Hours later during laundry delivery, a laundry attendant spots the stains and confrontation is inevitable. Without visitors arriving in the facility, time is irrelevant to both housekeeping and care staff. Sometimes a caregiver will

wait until after lunch ends to change a resident from pajamas to street clothes instead of after waking up the resident like expected. Or, if a housekeeper is busy or procrastinating, they will leave the dining room to be disinfected and mopped until just before dinner time.

Residents too have lost all sort of time because of the change in routine. Some are only subconsciously aware that on a certain day of the week their spouse or family visits, so time is marked by this meeting. Others are continually trying to break through the egress doors, setting off alarms because they *know* today is Sunday, so why is their brother not picking them up for church service? And other cognitively aware residents are constantly wondering into the front lobby asking for the date to address letters because even though they asked this only hours ago, the passage of time *feels* significant enough to be a new day. COVID-19 has taken all agency away from residents. They no longer can conform to a schedule they are familiar with and find ways to express individual pleasure and preference within the system. For many residents, the small amount of agency given is all they have to hang on to. Now, laundry is delivered at any time of day, rooms are cleaned on a different scheduling system, residents are being refined to rooms periodically for physical distancing meals, and some are now entirely because of weakened immune systems. Even the Activities Department is currently a one-person show and cannot offer events like the beloved weekly Sundae Sunday's that it once hosted. In this way, the facility is responsible for the additional mood changes and irritability from residents because of internal forces.

Before the virus started, care staff were able to at the beginning of every shift sit with a resident for roughly fifteen minutes — talking freely before any tasks of the day were completed. Considering some of River Heights' residents are speech impaired or confined to their rooms like previously stated, these fifteen minutes mean the world of difference. In plainer terms, some

residents are only able to have fifteen minutes of genuine, one-on-one conversation a day. A trend that I am seeing is if I am delivering laundry or cleaning a room, a resident will see me leave to attend to my cart in the hallway; the resident panics and asks why I am leaving them even if it is momentary to grab supplies. For some residents, I am the first person they could speak to all day and the idea that I could so quickly leave their side is a terrifying realization. The lack of social interaction in general in addition to the loss of familial visits have caused significant mood changes.

The incidents of two residents in particular I will mention. One resident has trouble hearing, and as a result many caregivers can be short with them. Particularly if just going in and out of their room due to time constraints. This resident, upon me leaving their room, grabbed me by the hand, begging for me to stay. I tried to explain gently that I had other rooms to clean, however I will be delivering their laundry at 2 PM and would love to stay and chat after since it marks the end of my shift. They kissed my hand and implored me that if I made that promise, I intended to keep it since so many make the promise and do not return. I promised to be back at exactly 2PM and when I returned, I found them perched in front of the door saying all they have done that day was sit in excitement and await my arrival. I sat with this resident for an hour where they just held me and wept for their loved ones they so greatly felt the absence of.

Another resident was experiencing a mental breakdown. Attempting to throw themselves out of their wheelchair, to cause themselves pain in any way they could. I am not a trained caregiver and there are many situations that legally I cannot help in (for example, lifting or mobilizing residents). While I pressed the blue call button that alerts the caregivers on staff that the room needs attention, the response was in no way immediate and I was in charge of diffusing the situation. I had my pink rag and disinfectant still in hand when I reached the room as the

resident was screaming in dire emotional agony. I conversed with this resident for approximately 20 minutes before a caregiver arrived. Most of the it was incoherent because of the cognitive degeneration and speech ability, but I rubbed their shoulders sitting beside them on the ground and kept reaffirming things will be alright. The breakdown subsided many minutes later by one simple solution: Ginger Ale. The resident claimed that the only thing they want in this world is a soda, “to feel like a person again”. When the caregiver relieved me, I rushed to the vending machine that rarely functioned and often stole your money, and prayed this would not be one of those times. It was. Carson and I looked mad trying to rock the machine back and forth until the soda finally fell out. It was such a simple request; how could anyone deny someone something so insignificant yet so meaningful to a resident as a can of soda?

Many complaints are issued back in forth over incidents like described above about employees allegedly not doing their job. Tensions all came to a head when I reported an instance of abuse. The case is still being investigated and due to HIPPA, information cannot be disclosed. However, the new management was not equipped or perhaps properly trained on dealing with abuse, claiming all sides of the story are “he said, she said” and did not go forward in investigating. Because the other party was not reprimanded in any fashion, it allowed them to retaliate against the Housekeeping Department in various ways. However, a notable weekend will suffice in explanation. This caregiver informed all other caregivers that even if clothes and linen are not soiled, they needed to be washed to prevent COVID-19 from spreading. On a normal laundry day, I do about four industrial sized laundry loads that take an hour to wash, an hour to dry, and forty minutes to fold and deliver. On this weekend, I did eleven loads a day in addition to the tasks this caregiver found for me. As I was so busy, there were crumbs in a hallway that took about 30 minutes for me to get to and vacuum up. This angered the caregiver

so much that they took the housekeeping cart and performed room cleans on their hall – a task they were not trained for. Additionally, they went to Carson the next day demanding a job in housekeeping because they waisted their whole shift cleaning. Carson informed the caregiver perhaps they could spend they shift doing what the job entails and not further neglecting the residents; to leave housekeeping to the professionals.

The petty squabbles go back and forth to the point every day is steeped in drama and confrontations. In moments of stress, it is easy to forget the dangerous level of low staffing we have reached, and it burdens the regular workload. While housekeeping as a whole has greatly improved since my initial fieldwork, the facility is failing to keep up with the demands of residents. We see management unable to make concise decisions to better the company because of the chain of command, and bickering on all levels of staff that have diminished trust between departments and therefore communication is at an all-time low. But furthermore, and at the end of the day, the residents are the largest impacted by these feuds.

### *Conclusion*

My initial fieldwork led me to the “easy”, one-step solution that all that needed to be fixed was ridding the employees taking advantage of Caron’s flexibility and slacking on necessary tasks. Because this department was so small, it essentially would require “cleaning house”. The workers were so engrained in their behaviors that confronting issues would do so little at that point. However, now seeing the larger company perform under a “stress test”, there are many issues that simply firing a few people could not sufficiently solve. The administrator has not yet lived up to the standards of the former and never leaves their office, but often yells at lower-level employees for respect. The new Care Services Manager is unable to reprimand

employees that are using this time without visitors to slack, be on their phones, or provide sub-par care as hiring quality, and retaining long-term employees during this pandemic has proven difficult. In my own department, Samish housekeeping has gone into a state of disrepair despite all my labor to update the housekeeping quality before I was promoted to the Padden Wing.

Overall, the feuding caused by stress, lack of resources, and over-working of trustworthy employees has diminished care and could have lasting effects on the residents. Facilities across the county are hurting in response to the ever-changing conditions generated by COVID-19. In fact, our sister facility in Texas has had 34 reported cases of the virus. Only time will tell if River Heights can withstand the internal and external pressures of deprived patients and the inevitable return of family members to the facility. The over-worked low-wage workers who do not have the pleasure to do more than the bare minimum are limited by the decisions of upper management, but will ultimately be the first to hurt in response to changing conditions that the virus brings.



*Notes on Extra Components*

In the poem “Wet Dreams”, I decided to take a humorous route to pay ode to the first week at my field site. Until my supervisor, Carson, knew what to do with me, I was on trim duty with my trusty Magic Eraser. And for the whole week, I had the recurring dream where I would fitfully sleep, having the intense urge and pressure to go back to scrubbing. My hands grew so weak and numb from the motions; I would cramp up if I bent my fingers. My knuckles were calloused from rubbing against the gloves and rags, and my knees were red from long periods of kneeling. I look back on these times in laughter, but I truly dreaded my days with the Magic Erasers – and I probably went through about thirty or so in completing this task.

In the poem “Sundae Sunday’s” I write about my first experience with elder abuse. It was during the early stages of the facility’s implementation of new procedures for COVID-19 and has ultimately framed my experiences at work since this incident. I am thankful to have a supportive department who coached me through the proper steps in reporting abuse, in addition to having my back in the retaliation that ensued. The Housekeeping Department is steadfast in reporting signs of abuse and neglect, and I am proud to be a part of the team that tries to make a difference at an otherwise restrictive company. If you are witnessing elder abuse, please contact the Washington State anonymous abuse hotline: **1-866-ENDHARM** (1-866-363-4276).

Wet Dreams  
By Victoria Hill

Every night  
For a week or two  
In feverish sleep  
I feel my hand clenching  
Grasping you  
You dirty thing  
You,  
a dirty Magic Eraser

Dripping wet  
With disinfectant  
Needing relief after a long day  
Discolored by dust  
The stains  
The dirt  
The scuffs  
You sure get around  
Around the Samish Wing's trim

I long to wake  
Wake to feel you once again  
You do your job  
And do it well  
Leaving a girl satisfied  
Satisfied that her boss appreciates her cleaning

When we first reunite  
You are so firm  
A light delicate smell  
Wafts in the air  
The smell of manufactured "green meadows"

And by the time we are through  
You are weak  
Crumbling  
To be replaced by another sponge

Until next time  
My strong, sudsy  
Magic Eraser

## Sundae Sunday's

By Victoria Hill

Pink, the color of a fresh, plush, microfiber rag  
Yellow, the color of the disinfectant spray  
Lemons, the smell wafting in the air after cleaning  
Dust, the smell of the vacuum needing to be emptied

Grunting, the sound of confrontation  
"Edelweiss", the echoes of the movie washing over the cries  
*Thump thump*, the feeling of anxiety pulsing through my veins  
Sweat, the sensation of a resident's hand against my gloves

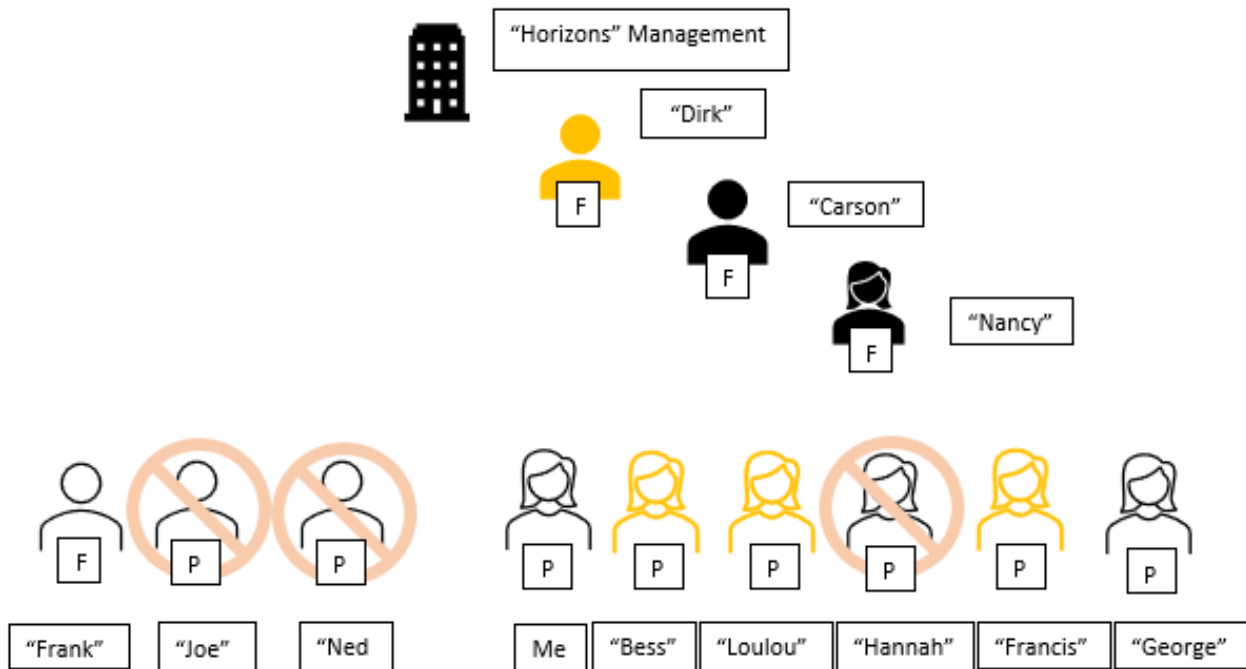
Abandonment, the emotion of the ground being kicked out beneath you  
Unfiltered rage, turning your skin pink and distorting vision  
*Click click click*, the sound of fingers flying to send a text  
"I get you dude", the sound of validation but not enough, not enough

Green, the color of mint chocolate chip ice cream  
Blue, the color of your twinkling eyes as you relax again  
Apples, the smell of fresh juice to relieve your panting gasps  
Blossoms, the flowers you turn your attention to, inhaling deeply before a sneeze

Pink, the color of your flushed, blushing cheeks  
Yellow, the shade of your shirt before you licked the ice cream from a tilted hand  
Lemons, the smell of wet wipes we use to clean you up  
Dust, will not cover this incident

*Appendix*

Character Chart, River Heights Housekeeping (Initial Field Work to Current Day)



| Figure Key |                 |
|------------|-----------------|
| P          | Part-time       |
| F          | Full-time       |
| Yellow     | New             |
|            | Former employee |

## Major and Minor Themes, Secondary field Research Summary

| Caregivers   | Housekeeping                                       |
|--|--|
| <b>Superiority Complex</b>                           | <b>Inferiority Complex</b>                         |
| Hard to find, communicate with, short                | Never communicated with; forgotten                 |
| No experience needing – in demand                    | Experience highly preferred, little training       |
| Extroverted, clique                                  | Introverted, minimal interpersonal skills          |
| Monotonous, similar tasks                            | Inconsistent tasks, days                           |
| Phone use on the floor                               |  |
| <b>Regarded as poor, lazy, untrained</b>             |  |
| <b>Essential in providing care for residents</b>     |  |
| Require more staffing to achieve adequate conditions |  |
| <b>“You won’t be managed [on the weekends]”</b>      | <b>“You wont’ be managed [if you do your job]”</b> |

## Washington State Law, Assisted Living Facilities (2019)

### **3388-78A-2170 Required assisted living facility services.**

- (1) The assisted living facility must provide housing and assume general responsibility for the safety and well-being of each resident, as defined in this chapter, consistent with the resident's assessed needs and negotiated service agreement.
- (2) The assisted living facility must provide each resident with the following basic services, consistent with the resident's assessed needs and negotiated service agreement:

- (b) Housekeeping - Providing a safe, clean and comfortable environment for each resident, including personal living quarters and all other resident accessible areas of the building;
- (c) Laundry - Keeping the resident's clothing clean and in good repair, and laundering towels, washcloths, bed linens on a weekly basis or more often as necessary to maintain cleanliness;

### **88-97-0680388-97-0800 Environment.**

The nursing home must provide and maintain:

- (1) A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible;
- (2) Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior;
- (3) Comfortable and safe temperature levels:
  - (a) Facilities licensed after October 1, 1990 must maintain a temperature range of seventy-one to eighty-one degrees Fahrenheit; and
  - (b) Regardless of external weather conditions, all nursing homes must develop and implement procedures and processes to maintain a temperature level that is comfortable and safe for residents;
- (4) Comfortable sound levels, to include:
  - (a) Minimizing the use of the public address system to ensure each use is in the best interest of the residents; and
  - (b) Taking reasonable precautions with noisy services so as not to disturb residents, particularly during their sleeping time; and
- (5) Lighting suitable for any task the resident chooses to do, and any task the staff must do.

### **388-97-1320 Infection control.**

- (1) The nursing home must:
  - (a) Establish and maintain an effective infection control program designed to provide a safe, sanitary, and comfortable environment and to help prevent the development and transmission of disease and infection;

- (b) Prohibit any employee with a communicable disease or infected skin lesion from direct contact with residents or their food, if direct contact could transmit the disease; and
  - (c) Require staff to wash their hands after each direct resident contact for which handwashing is indicated by accepted professional practice.
- (2) Nursing home personnel must handle, store, process, and transport linens so as to prevent the spread of infection.
  - (3) The nursing home must develop and implement effective methods for the safe storage, transport and disposal of garbage, refuse and infectious waste, consistent with all applicable local, state, and federal requirements for such disposal.
    - (a) Effective procedures for cleaning, disinfecting or sterilizing according to equipment use;
    - (b) Chemicals and equipment used for cleaning, disinfecting, and sterilizing, including chemicals used to launder personal clothing, are used in accordance with manufacturer's directions and recommendations; and
    - (c) Safe and effective procedures for disinfecting:
      - (i) All bathing and therapy tubs between each resident use; and
      - (ii) Swimming pools, spas and hot tubs.

### **388-97-1860 Laundry services.**

- (1) The nursing home must meet the requirements of WAC 388-97-2780, and:
  - (a) Launder nursing home linens on the premises; or
  - (b) Contract with a laundry service capable of meeting quality standards, infection control, and turn-around time requirements; and
  - (c) Make provision for laundering of residents' personal clothing.
- (2) For residents' personal clothing, the nursing home:
  - (a) Must have a system in place to ensure that personal clothing is not damaged or lost during handling and laundering; and
  - (b) May use a chemical disinfectant in lieu of hot water disinfection provided that the nursing home:
    - (i) Uses the product according to the manufacturer's instructions; and
    - (ii) Has readily available, current documentation from the manufacturer that supports the claim that the product is effective as a laundry disinfectant and such documentation is based on scientific studies or other rational data. "Disinfectant" means a germicide that inactivates virtually all recognized pathogenic microorganisms (but not necessarily all microbial forms, such as bacterial spores) on inanimate objects.

### **388-97-2100 Maintenance and repair.**

All nursing homes must:

- (1) Maintain electrical, mechanical, and patient care equipment in safe and operating condition; and
- (2) Ensure floors, walls, ceilings, and equipment surfaces are maintained in clean condition and in good repair.

**388-97-2320 Utility service rooms on resident care units.**

- (1) All nursing homes must:
- (a) Provide utility rooms designed, equipped, and maintained to ensure separation of clean and sterile supplies and equipment from those that are contaminated;
  - (b) Ensure that each clean utility room has:
    - (i) A work counter;
    - (ii) A sink equipped with single use hand drying towels and soap for handwashing; and
    - (iii) Closed storage units for supplies and small equipment; and
  - (c) Ensure that each soiled utility room has:
    - (i) A work counter and a sink large enough to totally submerge the items being cleaned and disinfected;
    - (ii) Storage for cleaning supplies and other items, including equipment, to meet nursing home needs;
    - (iii) Locked storage for cleaning agents, disinfectants and other caustic or toxic agents;
    - (iv) Adequate space for waste containers, linen hampers, and other large equipment; and
    - (v) Adequate ventilation to remove odors and moisture.

**388-97-2360 Linen storage on resident care units.**

The nursing home must provide:

- (1) A clean area for storage of clean linen and other bedding. This may be an area within the clean utility room;
- (2) A soiled linen area for the collection and temporary storage of soiled linen. This may be within the soiled utility room

**388-97-2380 Janitors closets on resident care units.**

- (1) The nursing home must have a janitor's closet with a service sink and adequate storage space for housekeeping equipment and supplies convenient to each resident unit.
- (2) **In new construction** a janitor's closet must meet the ventilation requirements of Table 6, in WAC 388-97-4040.

**388-97-2780 Laundry services and storage.**

The nursing home must comply with WAC 388-97-1860 and ensure:

- (1) Sufficient laundry washing and drying facilities to meet the residents' care and comfort needs without delay.
- (2) That the nursing home linen is disinfected in accordance with:
  - (a) The temperature and time of the cycle as specified by the manufacturer; or
  - (b) The hot water cycle using the following table:

| Water Temperature | Cycle Length       |
|-------------------|--------------------|
| 160 degrees F     | At least 5 minutes |



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140 degrees F

At least 15 minutes

**388-97-3220 Safety.**

The nursing home must provide:

- (1) A safe, functional, sanitary, and comfortable environment for the residents, staff, and the public; and
- (2) Signs to designate areas of hazard.

**388-97-3240 Safety — Poisons and nonmedical chemicals.**

The nursing home must ensure that poisons and nonmedicinal chemicals are stored in containers identified with warning labels. The containers must be stored:

- (1) In a separate locked storage when not in use by staff; and
- (2) Separate from drugs used for medicinal purposes.

**388-97-3260 Safety — Storage of equipment and supplies.**

The nursing home must ensure that the manner in which equipment and supplies are stored does not jeopardize the safety of residents, staff, or the public.

Preferred Terms for Assisted Living and Memory Care (common v. preferred):

- Patient v. resident
- Problem patient v. resident with unmet needs
- Alzheimer's or Dementia victim v. person living with Alzheimer's or Dementia
- Facility v. community
- Pod v. neighborhood
- Dementia unit v. Dementia community, member support
- Admit v. move-in
- Discharge v. move-out
- Room, unit, or bed v. apartment
- Bibs v. clothing protectors
- Diapers v. continence pads
- Bed-bound v. non-weight bearing
- Wheelchair bound or vegetative v. non-ambulatory
- Deaf v. hearing impaired
- Mute v. nonverbal
- Feeders v. residents who need assisted meals
- Fallers v. residents at risk for falls
- Graveyard shift v. noc/nightshift
- Screamers v. verbally active
- Transport v. escort
- Eloper v. exit seeker
- Wanderer v. walker

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