



SENIORS FOR SALE

A SEATTLE TIMES INVESTIGATION

Published Jan. 31, Feb. 1, Feb. 2, 2010

JANUARY 31, 2010
CLOUDY
46°-51° Low: 39°
SEA

The Seattle Times
Sunday
seattletimes.com

\$69
in coupon
value
inside

\$1.50
Monday through Saturday
\$2.00 Sunday

A SEATTLE TIMES INVESTIGATION
FIRST OF THREE PARTS

Seniors for sale

How the aged and frail are exploited in Washington's adult family homes



"I CAN'T LOOK AT THEM," Theresa DeWitt says upon the photos of frail, "senescent with albat" residents or even worse. DeWitt is left on adult family home. But Ann DeWitt is sharing her photos and story, hoping to help others.

Adult family homes in the state are seen as a national model, and in King County alone, they've become more plentiful than Starbucks stores. But the explosive growth, fueled by profiteers and a lack of careful state regulation, is leaving thousands of people vulnerable to harm.

BY MICHAEL J. BERENS • Seattle Times staff reporter

The locations of the homes were secret. Only a few people knew the \$500,000 line of credit would be in Seattle's address. The site remained an absolute secret until the first adult family home opened in 1985. It was a small, one-story building, just one room for each resident. The site was in a quiet neighborhood, and the residents were mostly frail seniors. The homes were built in a hurry, and the state Department of Social and Health Services began to receive complaints from families and neighbors. The homes were built in a hurry, and the state Department of Social and Health Services began to receive complaints from families and neighbors. The homes were built in a hurry, and the state Department of Social and Health Services began to receive complaints from families and neighbors.

PART TWO: A Tacoma man continues to operate an adult family home despite a long history of service violations, and even a preventable death. [► Continue on the Times](#)

State's trade with China gets even tougher

KEY MARKET FOR GOODS FROM WASHINGTON

New protectionist policy in China heightens friction

AN EXPLOSIVE TRADE
Strong business with China was seen as a bright prospect, but Washington state exporters and officials have been among the most vocal opponents of a new trade deal.

Lately, someone frictions with China are climbing over the tops of the fence.

The state's exports to China, in which the growth rate has doubled in the past year, are being hit hard by a new Chinese trade policy that will take effect at the top of the year.

U.S. Rep. Rick Warren, Washington's 2nd-district congressman, says the new policy encourages "the Chinese government. That's not only a requirement for industrial property but also in China to be developed and owned by Chinese companies."

Sen. Warren should study reports to be looking Chinese policy to get more from exports. "And U.S. Sen. FRANK RAY

CHINA RETALIATES in response to U.S. limits on exports to Taiwan. [►](#)

MICROSOFT COULD LOSE in its agreement for China. John Talbot writes. [►](#)

DETECTIVES' QUEST: Find relatives of foster kids [►](#)

"MANY WANT TO HELP" Searches reflect growing national shift toward tapping in for adoption [►](#)

BYRON SCHUMER the new Sen. [►](#)

ST. LOUIS: After a day of looking for an actor to play the part of the president, the film "Lincoln" is looking for an actor to play the part of the president.

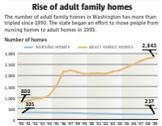
LAGOS: A former police detective says he's looking for a more fulfilling career and has been looking for a more fulfilling career.

THESE DAYS: A former police detective says he's looking for a more fulfilling career and has been looking for a more fulfilling career.

THESE DAYS: A former police detective says he's looking for a more fulfilling career and has been looking for a more fulfilling career.

Rise of adult family homes

The number of adult family homes in Washington has more than tripled since 1985. The state began an effort to more people from nursing homes to adult homes in 2005.



Year	Number of Homes
1985	1,000
1990	1,200
1995	1,500
2000	2,000
2005	2,500
2009	3,200

Web Extra
A WIFE'S SECRETS
How a woman's secret life led to a scandalous divorce. See the story at seattletimes.com/webextra

The project online:
seattletimes.com/seniorsforsale

A SEATTLE TIMES INVESTIGATION / PART 1

Seniors for sale

How the aged and frail are exploited in Washington's adult family homes



COURTESY OF ANN DETLEFS

"I CAN'T LOOK AT THEM," Darwin Detlefs' wife says of the photos of bruises "consistent with abuse" that his new nurses took the day he left an adult family home. But Ann Detlefs is sharing his photos and story, hoping to help others.

Adult family homes in the state are seen as a national model, and in King County alone, they've become more plentiful than Starbucks stores. But the explosive growth, fueled by profiteers and a lack of careful state regulation, is leaving thousands of people vulnerable to harm.

BY MICHAEL J. BERENS • *Seattle Times staff reporter*

The location of the home was secret. Only potential buyers with a \$500,000 line of credit could learn its Seattle address. The seller insisted on discretion because the price included three frail seniors who lived inside.

A Bothell real-estate listing last year touted five seniors for \$120,000, "sold separately" from the home. Bids for five vulnerable adults in Arlington opened at \$90,000 — "cash only."

These deals aren't illegal. Washington officials not only know about it, they allow it.

Twenty years ago, the state Department of Social and Health Services began licensing homeowners to provide spare bedrooms and care for the old or frail who might otherwise have to live in nursing homes.

These private residences — called adult family homes — were marketed as opportunities for seniors to live in cozy settings and familiar neighborhoods, close to family and friends, with more freedom and superior care.

The owners were given freedom, as well. To encourage this new industry, the state imposed few regulations — no requirements for a minimum level of employees or even, for many years, liability insurance.

Today, Washington is lauded nationally as a leader in community care options for seniors.

But inside the state's 2,843 adult homes, thousands of vulnerable adults have been exploited by profiteers or harmed by amateur caregivers, an investigation by *The Seattle Times* has found.

The *Times* uncovered accounts of elderly victims who were imprisoned in their rooms, roped into their beds at night, strapped to chairs during the day so they wouldn't wander off, drugged into submission or left without proper medical treatment for weeks.

In a Shoreline home, a worker whose previous experience was at McDonald's broke a resident's neck when attempting to move her from her bed. At a Seattle home, a worker handed a lit cigarette to a resident who was connected to an oxygen tank, setting off a fiery explosion.

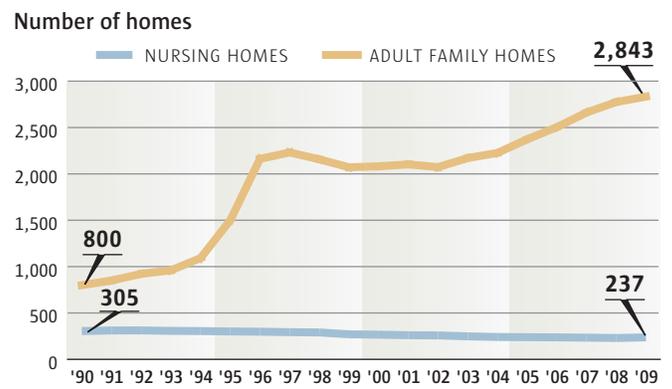
In scores of cases, owners raked in monthly payments while they pinched pennies and eliminated meals, turned off the heat, or left residents in urine-soiled clothing for days.

"DSHS has pushed so hard and developed these adult family homes so quickly that they have little ability to oversee them. It should scare people," said Gary Weeks, director of the Washington Health Care Association, which represents nursing homes.

About 11,200 people reside in adult family homes across the state. About three out of five residents are private pay. There are about 1,100 homes in King County alone, more than three times the number of Starbucks stores.

Rise of adult family homes

The number of adult family homes in Washington has more than tripled since 1990. The state began an effort to move people from nursing homes to adult homes in 1993.



Sources: Washington Department of Social and Health Services; Washington Health Care Association

THE SEATTLE TIMES

Web Extra

A WIFE'S REGRETS
Ann Detlefs talks about her husband's experience. See the video at seattletimes.com/seniorsforsale



ALAN BERNER / SEATTLE TIMES

“DSHS has pushed so hard and developed these adult family homes so quickly that they have little ability to oversee them. It should scare people”

GARY WEEKS, director of Washington Health Care Association, which represents nursing homes, and former director of the Oregon Department of Human Services



ALAN BERNER / THE SEATTLE TIMES

“MY MOTHER WAS IN HORRIBLE PAIN FROM THE PRESSURE SORE. ... IT COULD HAVE BEEN PREVENTED. ... THEN SHE DIED WITH MY DAD BY HER SIDE,” said Marcella Sides of her mother, Alice Clayton, whose ashes lie at Tahoma National Cemetery. Above, Sides’ father, George Hugh Clayton, a retired Navy commander, visits the columbarium at the cemetery. Alice Clayton died of complications from an infected sore she developed while the Claytons were living at an adult family home.

The pace of licensing is so furious that, on average, the state issues a new one every day.

Officials at DSHS, which inspects the homes at least every 18 months, say the majority are run by caring, competent providers with good records. Officials say the agency’s standards are among the highest of those states that allow similar homes.

However, The Times examined 15 years of inspection reports and found that, time and again, DSHS excused reports of abuse and neglect, even

when it knew that violators lied to its investigators, provided falsified medical records, or contributed to preventable deaths.

Overlapping trends exacerbate the problem: Washington’s aged population is growing. State budgets are underfunded, resulting in a cost-cutting strategy to move state-subsidized patients from nursing homes into less-expensive neighborhood residences. And in today’s battered economy, more people than ever hope to make money from their homes by taking in

the elderly.

Even a state-approved instructor, one of nine people allowed to teach new owners how to run an adult family home (AFH), makes a get-rich pitch:

“I see other businesses struggling in these tough economic times — but AFH cash flow keeps coming in!” Jo Lyn Cornelsen, who owns a Brush Prairie, Clark County, adult family home, wrote on her business Web site. “The AFH industry elevates minimum-wage workers to six-figure-

income business owners in under a year.”

But a Times analysis revealed a bleak reality behind the hype: For every four new homes licensed, three older ones go out of business.

“There’s always been this perception that it’s easy money, that it’s a way to make your mortgage payments,” said Carolyn Edmonds of the state Long-Term Care Ombudsman’s Office.

“Unfortunately, we see the often-tragic human cost when owners are lured by profits and not a desire to help people.”

Massive bruises, both old and new

In 2008, Ann Detlefs faced a tough decision. For several years she had prayed that her husband, Darwin — at 84, eight years her senior — could stay with her in their Everett home.

But the warning signs of memory loss, erratic moods and difficulty expressing himself were diagnosed as Alzheimer’s disease, and she couldn’t care for him by herself.

A retired manager for IBM, he had loved woodworking, crafting toys and furniture for family members from his garage workshop. Now he couldn’t take a shower by himself. He was incontinent and often so confused he would try to wander away.

Her first choice, a Seattle nursing home, had a waiting list. In May 2008, she settled on an adult family home, Hidden Gardens, where her older sister had received good care before moving elsewhere.

Owner Susan Martin charged \$3,200 a month to care for Darwin Detlefs, who joined five other seniors at the three-bedroom, 2,430-square-foot ranch home in Enumclaw. Martin and her teenage daughter slept in the garage, which was converted into a bedroom.

Within weeks, Martin complained that Darwin Detlefs was combative — he escaped from the house one evening and it took 20 minutes to get him back inside.

As a result, Martin enacted new financial penalties. Nighttime assistance would cost an extra \$600 monthly. Repeated demands to go to the bathroom — she dubbed it “inappropriate toileting behavior” — would bump it up to an additional \$1,000 monthly.

Martin would waive penalties if



COURTESY OF MARCELLA SIDES

“I’M A PRISONER IN MY ROOM,” Alice Clayton, above, told her daughter. Clayton, paying \$6,500 a month for care at an unlicensed adult family home in Northgate, had to stay in her bedroom from 6 p.m. to 10 a.m. because the caregiver considered the living room to be her own space in the evening.

families agreed to use medications to “correct the behavior” — in other words, sedate the residents, according to a copy of the rules provided to The Times.

Before long, Detlefs said, she observed signs that Martin was overwhelmed: The house looked unkempt; cat feces littered a bathtub; soiled laundry sat piled high; meals were skimpy and hastily prepared.

Martin “got terribly stressed out when her only caregiver went on vacation for two and half weeks,” Detlefs would later explain.

“It became impossible for her to safely take care of six patients by herself.”

In July, Detlefs spotted bruises on her husband’s arms and an untreated gash on his left hand. She said Martin explained that Darwin Detlefs had tripped over an empty wheelchair.

Ann Detlefs said she was suspicious and asked her husband if he was safe. In a rare moment of coherence, he said, “At least you don’t get yelled at.”

Alarmed, Detlefs transferred him to an Everett nursing home on July 31. During an admission exam, a nurse discovered massive bruises, old and fresh, across his shoulders. Nurses took photographs for evidence.

“I was told that the injuries were consistent with abuse,” Detlefs said.

She filed a complaint with DSHS. However, its investigation was “unable to verify alleged abuse,” records show. There was no acknowledgment of the photos.

After Darwin Detlefs moved out of the Martin home, the agency received complaints about mistreatment of three other residents in the home, DSHS records show. This time, investigators wrote, the evidence of physical and emotional abuse was overwhelming. The agency revoked Martin’s license.

Martin declined to be interviewed. The house was sold last month for \$220,000.

Ann Detlefs still wrestles with guilt: Should she have routinely undressed

her husband? Did she react too slowly? Did he suffer, unable to cry for help?

She said she kept the photos of the yellow and purple bruises on Darwin Detlefs' reed-thin body, but "I can't look at them."

Her husband died from complications of Alzheimer's last April. But in his nursing home he had regained weight and was happy despite the limitations of his disease.

That's the image of him Ann Detlefs said she chooses to remember.

More homes but fewer investigators

Washington's tiny adult-family-home industry got a boost in 1993 when the state, desperate to cut Medicaid expenses, began to relocate or steer patients from nursing homes into private residences, which cost less than half as much.

State officials maintained that nursing homes were glutted with lower-income patients, covered by Medicaid, who didn't require 24-hour care. Essentially, these residents were not infirm enough to justify the costs.

In the first year, DSHS reduced the number of its 17,448 nursing-home patients by 750. The next year, lawmakers approved relocations of 1,400 more.

State officials said the strategy, in 2008, saved \$105 million in state Medicaid funds that would otherwise have gone to nursing homes.

By 2012, DSHS plans to relocate another 1,100 nursing-home patients into adult homes or other community-based facilities.

The state may not be able to adequately oversee the growing ranks of government-paid and private-paid residents in adult family homes.

DSHS is not able to answer such questions as: Which homes and how many didn't provide enough food? What homes had assaults on residents?

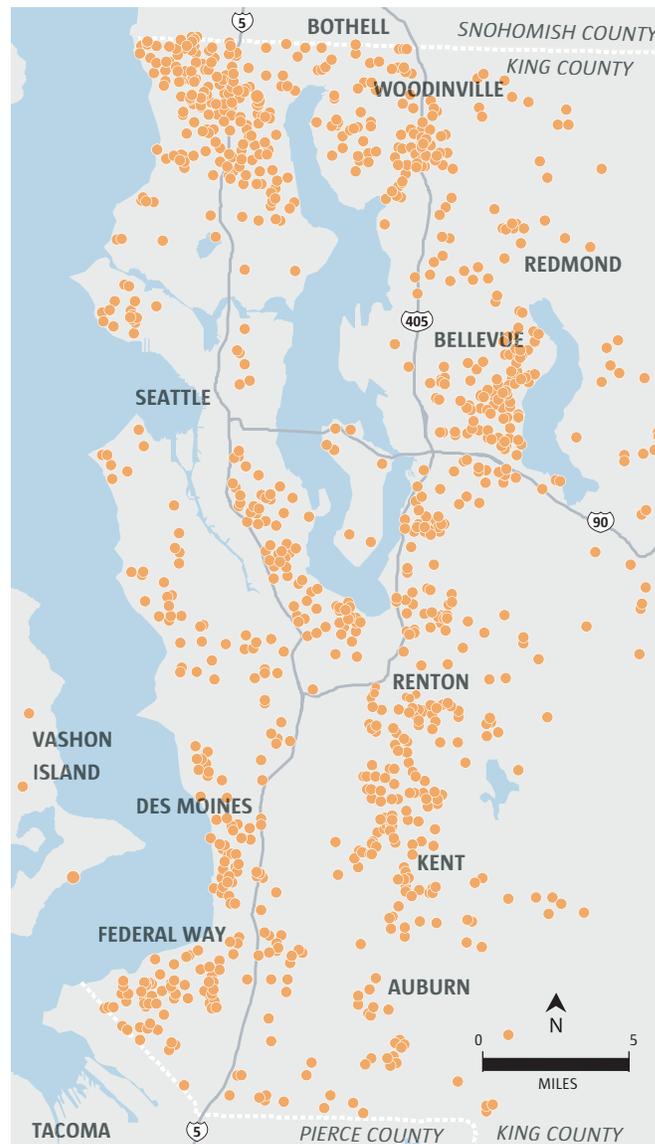
The Times coded and analyzed the past four years of enforcement actions, more than 2,000 records, and built its own database to provide answers unavailable from DSHS.

In 2008, for example, The Times found 576 violations involving caregivers performing unauthorized medical duties; 46 cases of residents unnecessarily restrained; and 1,201 instances in which medication records were missing or incorrect.

In a Bothell home, for example, a caregiver passed out Vicodin, a

Adult family homes flourish

Adult family homes can be found in nearly every city in the state. King County has about 1,100 of them.



Source: Washington Department of Social and Health Services

THE SEATTLE TIMES

narcotic pain medication, to control a resident who "talks a lot." The resident, who had no pain, was given the powerful drug at least 10 times in one month, records show.

Few cases are more tragic, or better underscore lax licensing standards, than a five-day lapse inside a Lynden, Whatcom County, adult family home.

In December 2006, owner Tony Nam, 69, was left alone with three residents when his two caregivers went on a short vacation. When the employees returned five days later, they discovered a critically ill female resident who was severely dehydrat-

ed and covered in fresh vomit. The caregivers demanded that Nam call for help.

The problem, according to a DSHS investigation, was that Nam "could not speak English well enough to explain the resident's health condition to the physician."

One of the caregivers had to grab the phone and explain the emergency.

The woman, 58, arrived at the hospital in a coma, with pneumonia in both lungs. She died five days later.

Nam's English was so bad that he later struggled to answer questions



ALAN BERNER / THE SEATTLE TIMES

“HE COULDN’T TELL ME HE WAS HIT.” Ann Detlefs, right, wrestles with guilt over her husband’s mistreatment in an adult family home.

from DSHS investigators. He did not recognize the woman’s symptoms as life-threatening, he told investigators.

The ability to communicate in English is one of the requirements to become an adult-family-home owner. DSHS officials could not explain how Nam passed the English requirement. They later revoked his license.

Nam couldn’t be reached for comment.

Kathy Leitch, a deputy director who oversees the DSHS Aging and Disability Services Administration, said a hiring freeze — the result of state budget cuts — has left fewer investigators to monitor more homes.

Many licensing and training standards may be outdated, she said.

“There’s this idea that it’s a cottage industry, and that the state shouldn’t be overly regulatory. Personally, I think that’s a bit naive.”

Unlicensed home, unnecessary death

In the early 1990s, the state limited owners of adult family homes to one residence. But lawmakers lifted the restriction when owners argued that the benefits of bulk purchasing

Getting help

Report abuse: Call the 24-hour EndHarm hotline, 1-866-363-4276

Check for violations: Call the DSHS regional office for the violation history of an adult family home. To check those in King County, call 253-234-6001. In Snohomish County, 360-651-6850. In Pierce County, 253-983-3849.

More resources at seattletimes.com/seniorsforsale

and hiring a universal staff, to rotate among homes, enhanced quality of care.

Today, 322 people own two or more adult family homes, according to a Times analysis.

Many of the better owners have successfully juggled multiple homes. But one with a particularly rocky history is Bernardita Sarausad, 62, a registered nurse who owns six homes in Seattle, Shoreline and Edmonds. Since 1999, DSHS has halted new

admissions to her homes three times after investigations uncovered sub-standard conditions.

State files reveal dozens of citations involving resident care, including preventable pressure ulcers (bedsores); delay of care; and undertrained staff.

Marcella Sides, of Kent, said she uncovered the same problems in 2007 with the care of her parents.

Her mother, Alice Clayton, 88, had become bedridden after a fall left her partially paralyzed. Her father, George, 87, a retired Navy veteran, could walk and care for himself. More than anything, he wanted to be with his wife. Few adult family homes were willing to accommodate them both.

Sarausad told Sides she had a two-bedroom condo near Northgate that would be just right for her parents. It would cost \$6,500 a month for 24-hour care for her mother and \$1,500 for meals and rent for her father.

The condo, however, was not licensed as an adult family home, according to state records. Its sole caregiver was a woman accused of fraudulently posing as a registered nurse at a Tacoma nursing facility, The Times has learned. Sides knew

none of this.

Sides did learn, however, that the caregiver often worked seven days a week without a break and slept on the living-room couch. "It was like slave labor," Sides said.

Unknown to Sides at first, the woman considered the condo's living room to be her space in the evening, and made Alice Clayton stay in her bedroom from 6 p.m. to 10 a.m. "I'm a prisoner in my room," she told her daughter.

Then Sides discovered an inflamed sore on her mother's left shoulder in early 2008. The caregiver and a visiting nurse said there was nothing to worry about, Sides said.

However, the wound worsened, and her mother died in March 2008 at a Seattle hospital; her husband was by her side. The death certificate cited the pressure sore and its subsequent infection as contributing causes of death.

Sides' father now lives in an assisted-living facility near Federal Way.

Sarasad would not respond to interview requests. On her Web site this month, Sarasad wrote that she plans to open three more homes this year, two in Shoreline and one in Edmonds.

Placement agencies: conflicts of interest?

Navigating the labyrinth of adult family homes can be confusing. There is no government clearinghouse to compare the quality of care and services from one home to another.

As a result, this gap has spawned a new kind of profiteer: senior-placement agencies.

These companies offer to match a senior's medical needs to the most appropriate care facility — free of charge. They will generate a list of suggested homes based on the person's medical needs and wishes, such as a private room or recreational activities.

These companies earn hefty commissions paid by owners of adult homes — a potential conflict of interest that is seldom disclosed, The Times has found.

A typical commission is equivalent to a resident's first month of rent, generally from \$2,000 to \$7,000.

Most of the placement companies are run out of home offices — anyone with a computer and a Web site can set up shop. No licensing, education

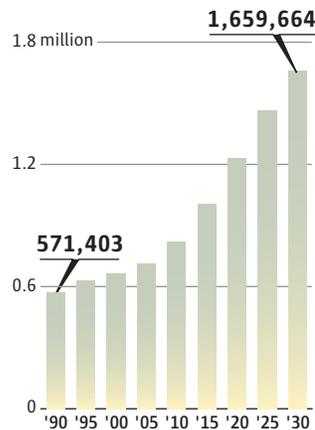


ALAN BERNER / THE SEATTLE TIMES

"I THINK PATIENTS IN MANY CASES ARE TREATED LIKE A COMMODITY AND I DON'T LIKE IT." Dotti Snow, right, who owns a senior-placement agency in Woodinville, says she has infuriated competitors by charging owners of adult family homes about half the going rate for a placement.

Washington's aged rising sharply

The number of Washington residents 65 or older, already climbing quickly, will more than double in 20 years.



Source: Washington Office of Financial Management

THE SEATTLE TIMES

or training is required. There are dozens in King County.

Are placement agencies steering people to homes that are the best fit — or instead to the ones that pay the highest referral fees? There is no way to know for certain.

But some in the industry are calling for more transparency and state licensing.

"I think patients in many cases are treated like a commodity and I don't like it," said Dotti Snow, 63, of Woodinville, a registered nurse who has operated Aging Safely, a placement service, for 11 years.

She said she has infuriated competitors by charging owners only half a month's rent, and by disclosing to customers that her fees are paid by the adult homes.

To try to get her to refer new residents to them, adult-family-home owners increasingly send gifts and cash to Snow. Currently, adult-home vacancies are at high levels as more financially strapped families delay paying for long-term care.

Snow said she sends back every gift card and gratuity, including, once, a check made out to her for \$1,500.

Long hours yield only modest income

So far, two potential buyers have toured the Seattle adult family home on sale for \$500,000 with the three residents inside. It is a 2,100-square-foot home on Northeast 133rd Street in Lake City owned by Mihai and Viorica Badet.

They've run the home since 1996

with no major citations, state files show. Mihai Badet, 62, also works full time as an engineer. His wife assists a full-time caregiver in the home. The Badets want out of the business.

Competition is stiff. Dozens of other adult family homes are on the market in Seattle and statewide. Sales pitches sound the easy-money theme: start making money now; guaranteed cash flow; opportunity of a lifetime.

The Badets know better. They care for an elderly man and two women, one of whom is bedridden. Their home grossed \$168,000 last year, with monthly rent for each resident averaging \$4,700. After expenses but before taxes, they netted \$57,000, according to information provided to prospective buyers.

They do not have residents to fill three empty beds, so their long hours bring only a modest income. Comparable homes in their neighborhood have sold for about \$400,000.

The Badets believe their home, with three residents under contract, is worth \$100,000 more, if a new owner can also qualify for a DSHS license.

"You need to really like this kind of business," Mihai Badet said. "... You're tied to the house 24/7. You can't go anywhere."

He offers this advice: "You can't do this for the money."

*Michael J. Berens:
mberens@seattletimes.com
or 206-464-2288.*

State-required training for prospective owners has serious flaws

BY MICHAEL J. BERENS
Seattle Times staff reporter

Before they can open an adult family home, owners are required, at their own expense, to get 48 hours of instruction from a state-approved trainer.

The state put this rule in place three years ago as a way to fix the problem of unprepared owners going out of business at a rapid rate. As many as 300 homes fail each year, most within the first two or three years. This disrupts the lives of hundreds of seniors and exposes them to a greater risk of mistreatment, a Seattle Times analysis shows.

Owners of failing homes often cut corners, which can lead to shoddy care, The Times found.

The state's training fix needs fixing itself. The Times has found that more than 200 prospective owners of adult family homes became certified even though they didn't complete 48 hours of training. Some did not take a single hour of instruction.

One trainer insisted on holding classes at a pizza shop, several adult-family-home owners told The Times. The trainer had them fulfill much of their course work by giving them homework, which didn't have to be turned in.

"I've heard horror stories where they go to a coffee shop and they pay up to \$900 and get their manual and leave without any formal training whatsoever," says Jack Arntzen, director of the Washington State Residential Care Council, which represents adult family homes.

Marta Acedo, a Department of Social and Health Services manager who supervised the training program before she retired last month, said the agency received dozens of complaints from adult-home owners who reported "wasting their time and their money."

"When we say 48 hours of instruction we mean 48 hours. We don't mean four hours of instruction and go read the manual," Acedo said.

DSHS officials said they are overseeing the training more closely now and terminated the contract of one instructor in November.

DSHS has not set standards for the instruction, other than that trainers must cover a dozen specific topics. Trainers charge anywhere from a few hundred dollars to \$950 for instruction, which allows owners to shop for the least-expensive or easiest courses.

DSHS said it "is evaluating" what to do about those owners who received inadequate training.

A SEATTLE TIMES INVESTIGATION / PART 4

Deaths in adult homes hidden and ignored

Abuse and neglect may have killed hundreds of residents. But with nobody questioning the circumstances, troubled homes are staying open.



COURTESY OF JAMES RUDOLPH

A HOME'S MISTREATMENT PROVES DEADLY

Neglect at an adult family home is blamed for the 2008 death of 87-year-old Jean Rudolph, a retired nursing educator who had Alzheimer's disease and heart problems. Infection from severe bedsores, which developed during her stay at the home, spread to her vital organs.



ALAN BERNER / THE SEATTLE TIMES

CAREGIVER ADMITS WRONGDOING

Effie Tutor, center, Rudolph's primary caregiver, appears in court last month to plead guilty to criminal mistreatment, a felony. Tutor, formerly known as Effie Dutton, was accused of neglecting Rudolph's condition for weeks.

BY MICHAEL J. BERENS
Seattle Times staff reporter

Some fell to the floor and bled to death internally. Others choked on food and suffocated. Still others languished for weeks as bedsores burrowed to the bone, ultimately killing them.

In neighborhoods throughout Seattle and across the state, hundreds have died prematurely, many in avoidable misery, while living at state-licensed adult family homes.

A Seattle Times investigation has uncovered at least 236 deaths that indicate neglect or abuse in these homes but were not reported to the state or investigated.

Dozens of suspicious deaths occurred in adult homes with long histories of violations, including some whose owners employed caregivers with little training or forged credentials.

In the first accounting of such deaths, The Times identified these cases by analyzing death certificates of 4,703 Washington residents who died at adult homes from 2003 through 2008.

Adult homes are a less-regulated, less-expensive elder-care option than nursing homes, and are touted as providing personalized care in cozy, neighborhood settings.

But The Times also found that adult-home deaths indicating neglect occur at strikingly higher rates than comparable deaths at nursing homes:

- Pressure-sore deaths in adult homes occur at a rate more than 3.5 times higher.
- The rate of deaths from falls is four times higher.
- For choking deaths, the rate is 15 times higher.

Adult family homes are regulated by Washing-

SENIORS FOR SALE | EXPLOITING THE AGED AND FRAIL IN ADULT FAMILY HOMES

Web extra

Search a database on enforcement actions at adult homes, and view key documents and videos of family members.

Online Q&A

Page Ulrey, a King County prosecutor who handles elder-abuse cases, answers your questions from 1:30 to 2:30 p.m. Tuesday. You can submit your questions now.

seattletimes.com/seniorsforsale

In Monday's Times

In hundreds of adult family homes, caregivers concealed serious and sometimes fatal neglect of elderly residents. When DSHS did learn of incidents, many times it failed to adequately investigate.



By law, all caregivers must report suspected abuse of the elderly to DSHS. However, King County's medical examiner says he's learned, well after the fact, of elderly deaths that his office would have chosen to investigate.



ALAN BERNER / THE SEATTLE TIMES

MEDICAL EXAMINER KEEPS PUSHING FOR REVIEW OF DEATHS

King County Medical Examiner Dr. Richard Harruff, who long has advocated more scrutiny of deaths at adult family homes, is collaborating with the University of Washington, which obtained a federal grant to examine deaths in all long-term-care settings.

ton's Department of Social and Health Services (DSHS), which licenses home owners to rent out spare bedrooms and provide long-term care for up to six seniors.

This housing option, which has boomed since the 1990s into a patchwork of 2,984 privately owned homes today, has earned the state a national reputation as an innovator in providing community-care choices for the elderly. Dozens of states plan to emulate Washington's program.

There is a dark side to that business boom. DSHS, for example, doesn't track how many residents die in the homes each year or question the circumstances.

The industry has expanded so swiftly and with so little oversight that it has attracted profiteers who,

until The Times exposed the practice earlier this year, freely marketed homes and the residents as good investments.

Kathy Leitch, DSHS' head of aging and disability services, said that most adult homes provide safe care and represent an important option and first choice for many seniors.

Cindi Laws, executive director of the Washington State Residential Care Council of Adult Family Homes, said only a small fraction are problem homes.

None of the 236 deaths came to the attention of DSHS, records show. When such cases do get reported to the agency, Leitch said, it investigates them and routinely refers evidence of possible crimes to law enforcement.

But in dozens of cases, DSHS

ignored or excused reports of suspicious deaths, including statements from witnesses, The Times has found.

By law, all caregivers are required to report suspected abuse of the elderly to DSHS. However, King County Medical Examiner Dr. Richard Harruff said he's learned, well after the fact, of elderly deaths that his office would have chosen to investigate. "Getting people to report seems to be a problem," he said.

Pain meds withheld after broken hip

Retired dairy farmer Clarence Yesland, 84, had struggled with Parkinson's disease and dementia for a decade until he became too frail to live at his Kirkland home. His wife, Marie, 82, moved him in 2004 to

Houghton Lakeview adult home, also in Kirkland.

The five-bedroom home, blocks from Lake Washington, was licensed to owner Patricia Goodwill. She billed \$3,500 a month for room and care.

“We thought the home was excellent,” said Yesland’s stepson, Gary Gelow, 67, of Kirkland.

What family members didn’t know until much later was that the home, while Yesland lived there, had been cited for more than a dozen serious violations during DSHS’ inspections.

One resident had not received enough fluids and was dangerously dehydrated. Caregivers considered another resident too active, so he was forced to consume anxiety medications prescribed for a different person.

Three staffers had convictions for felonies — assault, drug possession and child abuse — which by law should have disqualified them from working with vulnerable adults.

In January 2008, Yesland’s family was told Clarence had fallen in the kitchen. The family would later learn that his primary caregiver, a woman they trusted named Effie Dutton, may have delayed getting any care for him for two days or more, worried about losing her job.

“We never did get a good explanation about how he fell,” Gelow said.

After finally being taken to the hospital, Yesland was found to have a broken hip. But he was too weak to endure major surgery, his dementia was much worse, and he was unable to communicate coherently.

Yesland was given a narcotic to dull the pain from his hip. But Dutton told members of his family that the drug would hasten his death, Gelow recalled.

At the time, he was unnerved by Yesland’s rapid decline from being active to spending all his time curled in a ball in bed.

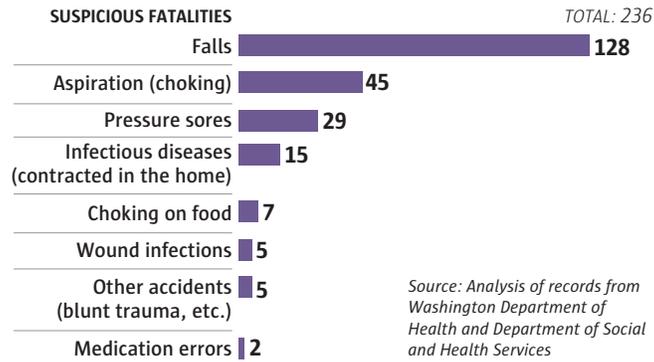
“She said that these medications put people into vegetative states and they die more quickly,” he said.

Dutton said that, as a favor to the family, she would not give Yesland the narcotics but falsify his medical record to show that she had, Gelow said. Trusting her, he agreed to the plan because he wanted his stepfather to live longer. Yesland died a month after breaking his hip.

A short time later, DSHS received a five-page, typewritten letter that

Hidden deaths

Using death certificates, The Seattle Times analyzed deaths inside Washington adult family homes from 2003 through 2008 and found 236 suspicious fatalities that had indicators of abuse or neglect. None of the deaths were referred to state regulators, police or medical examiners for investigation. There were at least 4,703 deaths inside adult homes in that time period.



Source: Analysis of records from Washington Department of Health and Department of Social and Health Services

Reporting by MICHAEL J. BERENS, Chart by M. NOWLIN / THE SEATTLE TIMES

How we identified the 236 deaths

The Times identified 236 suspicious deaths first by using addresses of adult family homes and matching them to those found in state databases of death certificates.

This showed that at least 4,703 residents died in state-licensed adult homes from 2003 through 2008. Most died from natural causes.

We next screened cases by primary and contributing causes of death that indicated possible neglect, such as internal bleeding from falls, choking and other causes termed “accidental.”

We also screened for deaths involving quality-of-care factors, such as late-stage pressure sores — those with open wounds and infections.

None of the 236 suspicious deaths led to an autopsy or investigation by law enforcement.

Because physicians typically sign death certificates for the elderly without a physical examination, signs of recent neglect — such as internal bleeding or pressure sores — can be overlooked. The cause of death often is a best guess, based on medical history.

As a result, the number of questionable deaths almost certainly is higher than 236.

By law, all caregivers must report suspected abuse of the elderly to DSHS.

However, King County’s medical examiner says he’s learned, well after the fact, of elderly deaths that his office would have chosen to investigate.

described widespread abuse and neglect inside the Houghton Lakeview home. The letter was signed by Dutton’s husband, Robert.

He and his wife had lived in the basement of the home for two years. Dutton wrote that his wife had pocketed prescription drugs from Yesland

and several other residents. She told him that she had fabricated medical files to cover up the thefts and sold the pills to a caregiver with a drug problem at a different adult home owned by Goodwill, he wrote.

As proof, he later provided empty vials of the residents’ medications,



ALAN BERNER / THE SEATTLE TIMES



WIDOW MOURNS; QUESTIONS LINGER

Marie Yesland, 82, above in her home, has saved the newspaper obituary about her husband, Clarence Yesland. The retired dairy farmer's death at a Kirkland adult family home led to accusations of neglect — including even the theft of his pain medication by a staff member — but state officials never investigated.

which he said he found in his wife's dresser.

Dutton also wrote that his wife had confided to him that Yesland was not promptly treated after falling, and that internal bleeding may have contributed to his death.

Dutton, who is now divorced, said he finally came forward because he couldn't live with the guilt and that it "made me sick to think of all the residents dying."

Gelow recently reviewed DSHS records and Robert Dutton's letter, provided by a Times reporter. Gelow said he was "stunned" to learn that

Effie Dutton had been cited for using a forged nursing assistant license. DSHS considered it a minor violation because adult homes are not required to have licensed caregivers.

Gelow believes that Effie Dutton likely diverted the drugs, resulting in unnecessary pain for his stepfather, who, with his dementia, could not communicate at the end of his life.

Gelow said he feels guilty. "Now I realize how I was duped," he said.

DSHS failed to investigate Robert Dutton's accusations about drug thefts and sales, records show. Nor did DSHS, or any agency, look into

Yesland's death.

Screams, stench and deadly infection

Dutton dropped another bombshell in his letter to DSHS: An elderly woman died from neglect just months after Yesland's death.

In May 2008, Dutton wrote, he received a panicked phone call for help from his wife. She had a medical emergency at the home with a female resident, but was afraid to alert 911.

The woman was Jean Rudolph, 87, a retired nursing educator who had Alzheimer's disease and heart prob-

lems. She had moved there six years earlier from her nearby home.

When Robert Dutton arrived, he learned that Rudolph had seven pressure sores, some so deep that muscles and bone were exposed.

“So we stripped Jean naked and the smell and her clothes were so bad, I opened the window and started gagging. Effie was gagging too,” he wrote. “Jean’s diaper was totally full of urine and poop and it looked like she hadn’t been changed for at least 24 hours.

“When we stripped her down, I looked at the sores and they were very red, inflamed and very infected. Jean was screaming loudly when Effie touched her sores and was fighting but I kept talking to her and trying to distract her.”

The Rudolph family had been told nothing about her pressure sores for 22 days, DSHS records show. Rudolph’s son, James, said when Dutton finally called him about his mother’s condition, he immediately went to the home and transferred her to the emergency room. It was too late — infection from the bedsores had spread to her vital organs.

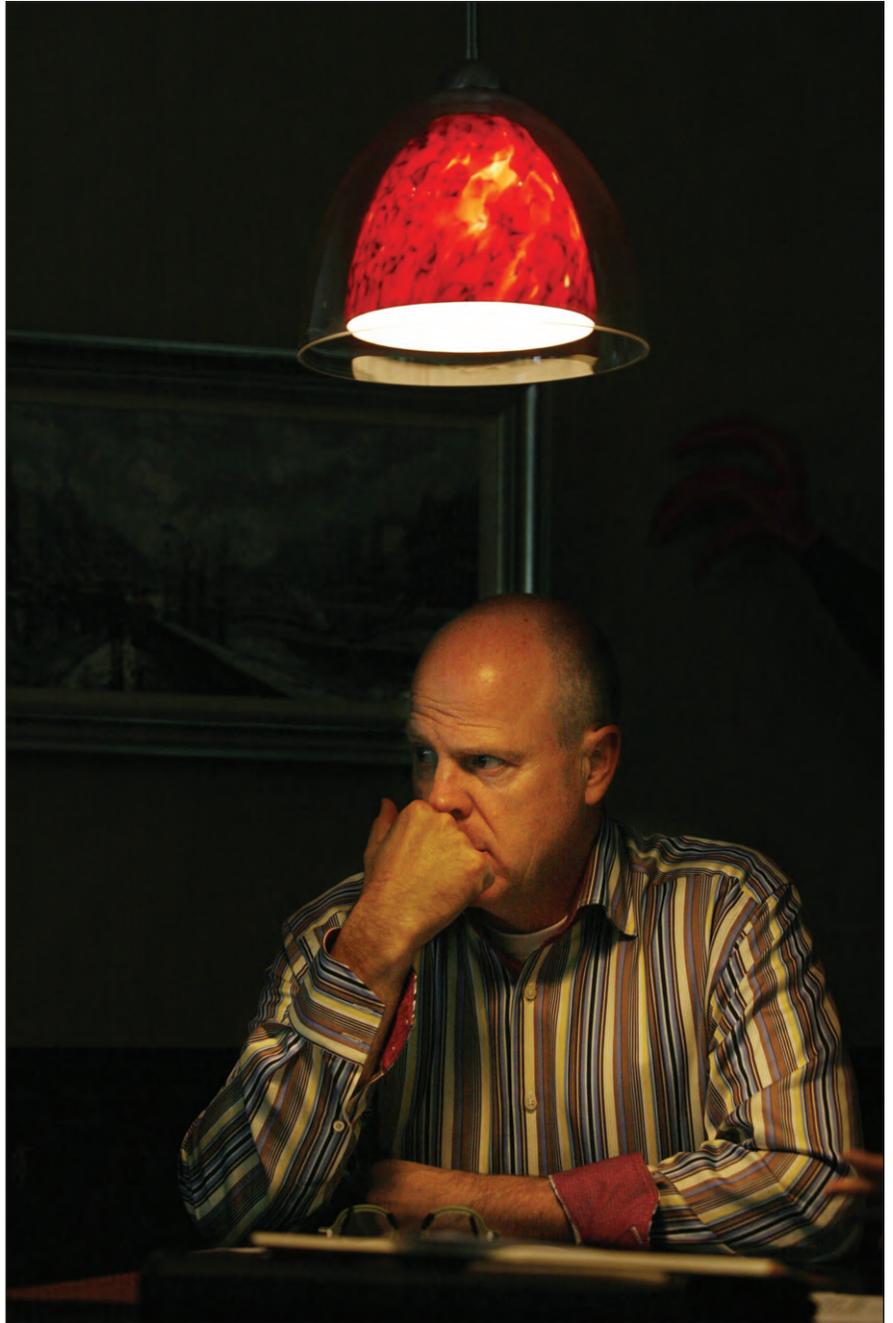
Jean Rudolph died in June 2008 at her son’s Bellevue home under hospice care.

“I think there’s really a lot of guilt,” said James Rudolph, 56, a Bellevue architect. “You kind of feel like: My God, how did this happen?”

The family contacted DSHS repeatedly about what happened to Jean at the adult home. DSHS eventually sent an investigator, who determined that Effie Dutton, instead of monitoring residents, often trolled the Web on her laptop computer, conducting a relationship with a man overseas via chat rooms and e-mails.

Dutton and Goodwill, the owner, were each charged with one felony count of criminal mistreatment for failure to provide proper care to Rudolph. Dutton, who remarried and was charged as Effie Tutor, pleaded guilty last month and awaits sentencing. Goodwill’s case is pending. Both declined to comment.

DSHS now requires adult homes to publicly post copies of violations. The agency made this change in February, shortly after The Times’ investigation showed how families were kept in the dark about a home’s violation history. In addition, DSHS now lists violations for adult homes on its website.



ALAN BERNER / THE SEATTLE TIMES

“YOU KIND OF FEEL LIKE: MY GOD, HOW DID THIS HAPPEN?”

James Rudolph was horrified by the open, pressure-sore wounds suffered by his mother, Jean, while she was living at an adult family home in 2008. Infection from the wounds proved fatal, and her son says his reaction to her death included “a lot of guilt.” The case led to criminal charges against caregiver Effie Tutor (formerly Effie Dutton) and the home’s owner, Patricia Goodwill.

Bedsore can be more than painful

The Times identified at least 29 adult-home deaths that were linked to advanced pressure sores.

In 2008 alone, three retirees in

Puget Sound-area adult homes died from complications of advanced pressure sores: a Lynnwood hairdresser, 93, who had multiple sclerosis; an Everett homemaker, 93, with heart disease; and an Issaquah homemaker,

About the Seniors for Sale series

Earlier findings:

Explosive growth of adult homes, fueled by profiteers and a lack of careful state regulation, has left thousands of people vulnerable to harm.

DSHS excused reports of abuse and neglect, even when it knew that violators lied to its investigators or contributed to preventable deaths.

The state saved hundreds of millions of dollars relocating the poorest residents to adult homes. In hundreds of cases, medically fragile adults were placed in the hands of caregivers who were inadequately trained to keep them safe.

Changes so far:

Home owners must publicly post inspection reports and violations.

DSHS will publish online all enforcement actions against adult homes.

Real estate officials agreed to ban listings that offered elderly residents for sale as part of an adult home purchase.

Parts 1-3 of the series: seattletimes.com/seniorsforsale

Facility name	Address	
31st Street AFH	1550 31st St.	Port T
A Home Sweet Home Inc.	801 10th St SE	Puyal
A Sunshine Haven Inc.	410 NE 23rd St	East Wena
AAA Ranch	2419 Dishman-Hilca Rd.	Spok
All Comfort Care	4219 NE 68th Ave	Vanc
Alpha Adult Family Home	31735 8th Ave. S	Feder

▶ **WEB EXTRA**

Search our database

Look for homes with recent enforcement actions, available now due to DSHS' response to Seniors for Sale. seattletimes.com/seniorsforsale

91, who had severe dementia.

None of the cases was reported to DSHS.

Asked about this recently, DSHS' Leitch said she is concerned that many cases of "elder abuse and neglect are not reported."

Pressure sores, also called bedsores, commonly plague seniors who are bedridden or rely on a wheelchair to get around.

Researchers disagree over how the sores develop — above or below the skin — and even how quickly they advance. Constant pressure against the skin, especially along bony areas, may reduce blood supply and kill tissue.

Sores have four classifications: a reddened area of the skin (Stage 1); a large blister (Stage 2); an open wound (Stage 3); and finally, a gaping wound with exposed muscle, tendon or bone (Stage 4).

Most medical professionals believe that Stage 3 or 4 pressure sores are likely signs of neglect.

If detected early, the sores are treatable with ointments or powders. But constant vigilance is needed. To avoid prolonged pressure that can develop sores, doctors sometimes require at-risk seniors to be shifted every one to two hours, particularly at night, which requires a well-staffed home with diligent caregivers.

Staffing, safety loosely regulated

Health-care research conclusively links higher staffing to lower fatality rates. It's a simple formula: More caregivers equals better care.

With nursing homes, the federal government has stepped in and mandated minimum levels of staffing, including a requirement of 24-hour care overseen by a registered nurse.

But Washington's adult homes are not regulated by federal law. And Washington law, so far, hasn't required adult homes to follow the dozens of safety standards required of nursing homes.

For example, an adult-home owner or sole staffer is not required to be awake at night when overseeing as many as six residents. Owners and staffers aren't even required to have a minimum health-care license, such as that of a nursing assistant.

State ownership rules are so loose that some adult-home owners are business investors who have no prior health-care experience, buying and leasing adult homes like fast-food franchises.

Washington legislators have tried but failed to fix some of these problems. The adult-home industry has opposed additional staffing requirements as unnecessary and too costly.

Lawmakers have been reluctant to

impose tougher measures on what they often perceive as mom-and-pop enterprises.

A sharp rise in accidental deaths

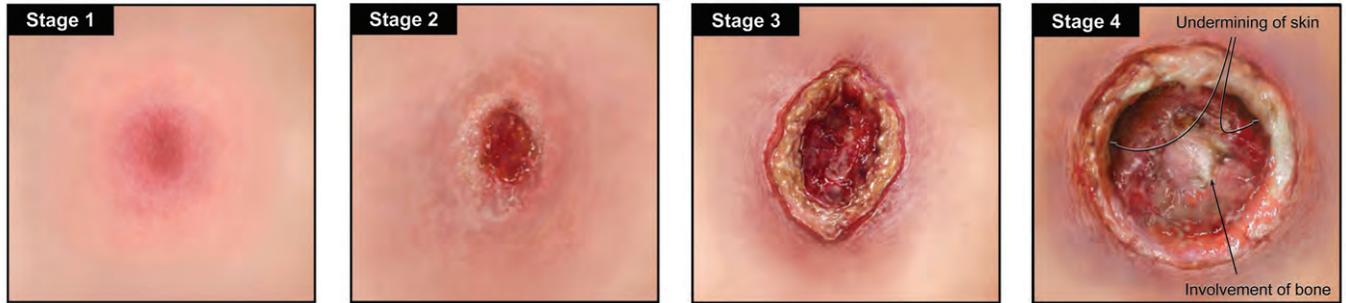
For nearly a decade, Washington's rate of accidental deaths in adult homes and nursing facilities remained the same, about one out of 50 deaths. But the accidental-death rate for adult homes jumped 50 percent in 2007, and again the following year.

Adult-home residents now die from accidents at twice the rate of those in nursing homes, a Times analysis of death certificates shows. A key reason centers on the declining number of caregivers at homes. During this economic recession, scores of owners have cut staff and services to stay afloat, adult-home industry officials said.

State records reveal a pattern of problems during night shifts at adult homes. For example, in November 2007, a Seattle adult-home resident, 77, was found dead in his room. A catheter had dislodged from his arm and he slowly bled to death unnoticed during the night, according to DSHS, which received a complaint about the incident.

In another case, at a Kent adult home last year, a caregiver discovered an unconscious woman sitting

How to recognize and prevent pressure sores



MICHAEL D. HAVRANEK / AMICUS VISUAL SOLUTIONS

Seniors who are immobilized face a much higher risk of getting pressure sores, also called bedsores. They are formed by unrelieved pressure against the skin, cutting off blood supply, commonly at bony areas such as the elbow, tailbone, hip, ankle or heel.

Prevention begins with a healthy diet, including protein and lots of water, to maintain strong skin.

Those who are bedridden or who use a wheelchair must be frequently repositioned to relieve pressure — every two hours in bed and hourly or more frequently in a chair.

Avoid prolonged wetness to the skin. Immediately change wet undergarments.

Early-stage pressure sores first appear as white areas on the skin. If pressure is not relieved, the sore will become red and irritated; the skin may feel warm. If untreated, the

skin will break away, leaving an open wound, often leading to infection.

For those at risk, their skin should be inspected daily by a family member or caregiver, who should undress them if necessary to look for blanching, redness or breaks in the skin. They need to avoid lying or sitting on the discolored skin until it returns to normal.

Ask caregivers to check the skin daily and note its condition in medical charts.

Do not use harsh soaps or those containing alcohol, which dry out the skin. After washing, pat it dry with a towel, avoiding any brisk rubbing. Apply skin moisturizer daily.

If in doubt, seek immediate care. Pressure sores can advance quickly, making them difficult to remedy.

in her wheelchair in the kitchen. The 61-year-old woman had accidentally taken too many prescription drugs. The caregiver wheeled her to her room. Not strong enough to lift her, the caregiver rolled the comatose woman onto the bed, face down. She was found dead in the morning.

In health care, these kinds of deaths are called “failure to rescue,” meaning the deaths would have been avoided if a caretaker had noticed the problem and taken the correct action.

Choking to death on food falls into this category. The elderly often have trouble swallowing, a condition caused by dozens of medical maladies that interfere with this seemingly simple task.

Caregivers are required to properly prepare food, such as cutting hot dogs into small pieces, and then to monitor residents’ mealtimes. But many homes employ just one caregiver during the day, making it difficult when overseeing six residents, the

maximum allowed per home.

The Times identified seven adult-home residents who choked on food and suffocated from 2003 through 2008. In contrast, nursing homes, which have many more residents statewide — about 17,000, to adult homes’ estimated 11,000 — had only one choking death.

The Times identified 128 adult-home residents who died from injuries related to falls but whose cases were never investigated. Among those who died, all from head injuries, were a retired seafood distributor, 94, of Darrington; a former Spokane medical tech, 94; and a retired Renton teacher, 88.

Not all accidental deaths can be prevented. But such deaths, at the very least, should spark a review of care at the homes, said Seattle police Detective Suzanne Moore, who specializes in investigating deaths of the elderly.

Strong resistance to fatality reviews

In 2006, King County prosecutors, the medical examiner and Seattle police came up with a plan to review adult-home fatalities. They believed that some were likely caused by neglect but had not been reported as suspicious deaths, said Harruff, the medical examiner. A Seattle police detective planned to visit each Seattle adult home when it had a death.

But the idea faced instant opposition. Families were apprehensive about privacy. Owners feared unnecessary disruption. Physicians worried about second-guessing from medically unsophisticated police officers.

“There was just huge push-back,” said Detective Moore, part of the review team. “There were those who didn’t want the police responding to every death.”

Today, Harruff is trying again. He’s collaborating with researchers at the University of Washington, which



ALAN BERNER / THE SEATTLE TIMES

“WE THOUGHT THE HOME WAS EXCELLENT”

Gary Gelow, stepson of Clarence Yesland, says his family didn't know about violations cited in state inspections. He was taken in by a caregiver's claim that withholding pain medication would help his stepfather live longer.

obtained a federal grant to examine deaths in all long-term-care settings, and they plan to publish their findings next year.

Autopsies, which are reserved for unexpected, violent, suspicious or unnatural deaths, are performed in about 10 percent of the state's 46,000 annual deaths. For adult-home deaths, which typically are not unexpected, the autopsy rate is just 1 percent, a Times analysis shows.

Barring an autopsy, the cause of death listed on a death certificate often represents a best guess, based on medical history. Frequently, the dead are not examined by physicians. So when doctors sign death certificates, they may be unaware of recent injuries, such as pressure sores or hemorrhages from falls.

As a result, the number of suspicious deaths at adult homes is almost certainly higher than the 236 identified by The Times.

In the case of Clarence Yesland, the physician who signed the death certificate had last examined him weeks earlier. Yesland's body was transferred directly from the adult home to a funeral home, then cremated.

Gelow said he and his mother are upset that DSHS kept them in the dark and then failed to pursue evidence of neglect.

“The state closed this case and never asked me or my mother a single question,” Gelow said. “It makes you wonder how many times they've done this.”

Michael J. Berens: mberens@seattletimes.com or 206-464-2288. Seattle Times researchers David Turim and Gene Balk contributed to this report.

The Seattle Times



SENIORS FOR SALE

A SEATTLE TIMES INVESTIGATION / PART 6

Published Dec. 12, 2010

DECEMBER 12, 2010
SEATTLE, WASH.
\$2.00
seattletimes.com

The Seattle Times
Sunday
WINNER OF A 2010 PULITZER PRIZE

More than \$124 million in savings
from the state

SENIORS FOR SALE
EXPLOITING THE AGED AND FRAIL IN WASHINGTON'S ADULT FAMILY HOMES

Bed brokers scramble to cash in

Referral companies charge adult homes hefty fees to steer seniors to them; most never check the facilities for quality



BIG BUSINESS: Pamela Temple, co-founder of A Place for Mom, the nation's largest senior placement firm, leads the company from its headquarters in Seattle's Lower Queen Anne neighborhood. Analysis estimates the private company pulls in \$150 million a year.

A SEATTLE TIMES INVESTIGATION: P 81-814

BY MICHAEL J. BISHOP • Seattle Times staff reporter

For the elderly, it happens unexpectedly and all too often: They suffer a stroke or break a hip and find themselves unable to live safely in their homes. Suddenly, their family must scramble to find them care and a new place to stay.

Business plan: Pamela Temple, co-founder of A Place for Mom, the nation's largest senior placement firm, leads the company from its headquarters in Seattle's Lower Queen Anne neighborhood. Analysis estimates the private company pulls in \$150 million a year.

Web extra
Watch the Seattle Times' coverage of this investigation at seattletimes.com/seniorsforsale

Madoff son commits suicide in N.Y. loft

BY DENISE HENNINGSEN
NEW YORK — Jakob Madoff, Bernard Madoff's older son, hanged himself in his Manhattan loft last week, the New York Times reported.

Madoff, 45, took his own life in his Manhattan loft last week, the New York Times reported. He was the son of the hedge fund manager who was convicted in 2008 of defrauding investors of \$64.8 billion.

Teens go old school, quit social media

THE SOCIAL EXPERIMENT | More than 600 students in Shoreline's Shorecrest and Shorewood high schools have been trying to spend a week abstaining from Facebook, Twitter, text messaging and e-mail.

BY NICOLE FRODO
Seattle Times Staff Reporter

Since Monday, Taylor LaCasse, 16, has been calling his team instead of writing her to let her know what she's doing. Shannon Elzoff, 17, has joined up with her friends to help out. Nicole Wynne, 16, has inspired some to give up their own smartphones.

When did this start?
For 100 years, Shoreline high school students have been taking a life where one manager and teacher book didn't exist. As part of a project called The Social Experiment, more than 600 students have given up their

WEB EXTRA
Video of The Social Experiment
Students and teachers can view their own video at seattletimes.com/socialexperiment

TEENS | A group of students from Shoreline High School are participating in The Social Experiment, a project where students abstain from social media for a week. The experiment ends Saturday night.

The project online:
seattletimes.com/seniorsforsale

A SEATTLE TIMES INVESTIGATION / PART 6

Bed brokers scramble to cash in

Referral companies charge adult homes hefty fees to steer seniors to them; most never check the facilities for quality



ALAN BERNER / THE SEATTLE TIMES



BIG BUSINESS: *Pamala Temple, co-founder of A Place for Mom, the nation's largest senior-placement firm, leads the company from its headquarters in Seattle's Lower Queen Anne neighborhood. Analysts estimate the private company pulls in \$50 million a year.*

SMALL BUSINESS: *Brandon O'Larey visits Freida Johnson, whom he helped place in a home in University Place. Working alone, he personally checks each home he works with.*



ALAN BERNER / THE SEATTLE TIMES

Janet Rhode meets with each of her residents every day. Rhode has six adult family homes and does not use bed brokers. She told A Place for Mom to stop contacting her with names of potential residents. "How do they know whether to refer people to my places? They've never been inside my homes."

BY MICHAEL J. BERENS / *Seattle Times* staff reporter

For the elderly, it happens unexpectedly and all too often: They suffer a stroke or break a hip and find themselves unable to live safely in their home. Suddenly, their family must scramble to find them care and a new place to stay.

Dozens of private agencies in Washington state promise to guide families through the labyrinth of options to an adult family home or assisted-living facility that best fits their needs — all for free.

"Don't make this important decision alone," Seattle-based A Place for Mom, the nation's largest senior-placement service, urges in an online pitch.

But behind these free offers can lurk a hidden cost.

Placement companies, which rely on commission-only sales people, funnel the aged only to facilities that have agreed to pay thousands of dollars in finders' fees.

In addition, most placement com-

panies do not screen homes for past violations. As a result, many have referred seniors to facilities with documented histories of substandard care, including fatal neglect.

In 143 cases over the past three years, seniors were victimized after companies placed them in adult family homes, or other long-term-care facilities, that had a record of serious violations, a Times analysis of Department of Social and Health Services documents reveals. The documents did not identify placement companies by name.

Cases include residents with dementia locked in rooms to prevent wandering; mentally ill adults drugged into submission to control

behavior; and bed-bound seniors abandoned without assistance for up to 16 hours.

Nationally, elder placement is a rapidly expanding, multimillion-dollar industry that serves the nation's growing aged population. In the Puget Sound area, about 40 companies are spread across King, Pierce and Snohomish counties.

Many have stellar records and serve as an important bridge between seniors who need care and the facilities with open beds.

But the lure of making fast money has also attracted dozens of profiteers to this little-examined industry. They face no licensing, education or training requirements, and can quickly set

To fill an empty bed, adult-home owners pay placement agencies the equivalent of one month's rent, on average about \$3,500.

up shop.

Competition is so fierce that last year a bed broker repeatedly trolled a parking lot of a Bellevue rehabilitation center for visiting families, said its director, Kelly Callahan, of Mission Health Care. The salesman left only after Callahan threatened him with a restraining order.

At stake are commissions worth thousands of dollars for every senior. To fill an empty bed, adult-home owners pay placement agencies the equivalent of one month's rent, on average about \$3,500. Large placement companies adopt strict quotas on employees to maintain speed and volume.

The sales mantra for the industry: "Put the head in the bed."

Many eldercare advocates are dismayed by this pay-to-play system.

"We need to find a way to protect seniors from exploitation," said Louise Ryan, who heads Washington's ombudsman program. "Right now there are no rules, no standards. Some companies seem more interested in making money than helping seniors."

"WHO ARE THESE GUYS?"

Six years ago, Janet Rhode, owner of several adult family homes in Seattle, began to be inundated with unsolicited faxes that touted seniors for sale.

Page after page showcased a roster of seniors who were looking for board and care. The faxes included such details as financial situation, medical condition, date of birth and even Social Security number.

"I was shocked," said Rhode, an advanced registered nurse practitioner. "I couldn't believe that private information could just be faxed to dozens of places at the same time."

The company sending the faxes, Rhode said: A Place for Mom.

A Place for Mom hoped that Rhode would contact these seniors to try to persuade them to move into one of her homes. If that happened, Rhode would have to pay A Place for Mom the equivalent of one month's rent for



ALAN BERNER / THE SEATTLE TIMES

Adult family home owner Janet Rhode uses a complex system of locks and devices to keep residents from leaving the grounds. She specializes in caring for seniors with dementia, which requires additional staff and extra precautions.

each person.

Rhode currently charges \$7,100 a month — far higher than most homes — because she specializes in dementia care, which requires more staff.

Adult family homes are promoted as a cozier, less-expensive alternative to nursing homes. Owners provide spare bedrooms and care for up to six adults. The number of state-licensed homes has more than tripled over the past two decades to 2,975.

This unchecked growth, the battered economy and the business inexperience of many owners have led to high vacancy rates. Profit margins are often so thin that even one empty bed can be the difference between profitability and going out of business, Rhode said.

Additionally, unlike corporate-owned assisted-living facilities, mom-and-pop adult family home owners typically lack the business savvy and

funds to mount marketing campaigns to attract new residents.

Placement companies fill an important need — filling empty beds — but many exploit this need, said Cindi Laws, executive director of the Washington State Residential Care Council, an adult family home trade group.

"Placement companies absolutely control the rules," she said. "They control the rates. They have impunity to act. In the absence of protections for seniors, those who are unscrupulous will do whatever they can to make a buck. And there are clearly placement agencies whose primary interest is to make a buck."

Hundreds of owners reluctantly have turned to placement services. But Rhode is one of the fortunate few. There are seldom vacancies in her six homes — all with stellar records, state records show.

Rhode told A Place for Mom to stop



ALAN BERNER / THE SEATTLE TIMES

Lillian Anderson has a lifetime of possessions to sort through as she and her husband, Birger, both 85, prepare for the next day's move from their Bellevue house into an assisted-living facility. They picked their new home with help from Choice Advisory.

sending faxes.

A company executive said she didn't believe her employees sent the faxes because they are not supposed to send such information to homes not under contract.

Rhode refuses to sign a contract with A Place for Mom.

"I have to contact the family and do all the work. And then this company expects me to pay a big commission just because they got hold of a name?" Rhode said.

"How do they know whether to refer people to my places? They've never been inside my homes. Who are these guys?"

INTERNET AND PHONE

In July 2000, a Seattle couple and a college friend opened A Place for Mom and upended the senior-referral industry by embracing the speed and reach of the Internet.

Today, the Seattle company is the nation's largest placement service, spanning 45 states with 450 referral

brokers in home offices. Nationally, it has contracts with 18,000 eldercare facilities. Financial analysts estimate the private company pulls in \$50 million a year.

Behind this digital-era juggernaut is John Temple, a former Microsoft manager; his wife, Pamala, an experienced long-term-care executive; and entrepreneur Brian Trisler, a college friend.

The company's website attracts more than 60,000 visitors a month and instantly prompts them for contact information. Within 15 minutes, that information is routed to an employee, called an eldercare adviser, who quickly calls and gathers more information, Pamala Temple said.

Advisers provide seniors with a list of referrals to half a dozen or more adult homes, including information about costs and services. In turn, advisers send information about the seniors to adult homes. If a placement results, A Place for Mom collects a

commission, with about \$650 going to the adviser, company records show.

Many placement companies visit seniors at home to assess their medical conditions, then take them on tours of appropriate adult homes until they pick one. The process often takes weeks.

A Place for Mom generally does not meet face to face with families or take them on tours. Seniors and their families are responsible for visiting the homes themselves.

Instead, Temple said, her staff is trained to work with people over the telephone and by e-mail. An employee is required to visit the home once it's placed on the referral list, she said.

However, a dozen Washington families told The Times that A Place for Mom guided them to homes where caregivers said the company had not visited in years or not at all.

When told this, Temple acknowledged that staffers may be behind on

visiting the homes.

A Place for Mom has about half of Washington's adult homes under contract. Seniors are told that her company refers them only to facilities that have agreed to pay finder's fees, she said.

Contracts are so ironclad that A Place for Mom collects commissions even when seniors or their families do nothing more than visit the company's website, provide their name, find a listing and call it themselves.

The company does not routinely check to see whether the home has a history of violations. As a result, A Place for Mom has on its referral list dozens of homes with histories of substandard care, including homes currently on probation for abuse or neglect violations, The Times found.

For example, the company listed a Tacoma adult family home, Narrows View Manor, which has been cited with more serious violations than any other home, including fatal neglect.

State inspectors cited the home's owner and employees for hiring caregivers with felony convictions that should have disqualified them from working with vulnerable adults; lying to state investigators and fabricating records; and failing to provide proper care for 32 days to Nadra McSherry, an 88-year-old woman who died from untreated pressure sores.

Temple removed the home from its referral list last week after questions from The Times.

Veteran employees can make six-figure salaries if they achieve strict performance quotas. A regional manager can earn \$122,000 a year if he or she generates 50 new people to call and places 10 seniors every month, internal company records show.

Top performers are also rewarded with cash bonuses and luxury cruises.

The company randomly monitors telephone calls of its 450 advisers to track how many hours are spent on the phone, and warns those who fall short of their goals, Temple said.

Employees have also pushed back. In April, the company settled a federal class-action lawsuit for \$1.7 million involving 222 employees. The 2008 suit alleged labor violations that included uncompensated overtime, delayed commission payments and not reimbursing job-related expenses.

Revenues have climbed this year, Temple said. In July, Warburg Pincus, a large Wall Street private



ALAN BERNER / THE SEATTLE TIMES

Les Ostermeier owns Choice Advisory, based in Mill Creek. Choice has 21 employees who inspect facilities and meet face to face with seniors and their families.

“We need to find a way to protect seniors from exploitation. Right now there are no rules, no standards. Some companies seem more interested in making money than helping seniors.”

LOUISE RYAN
Head of Washington's ombudsman program

equity firm, bought a majority stake in the company. It sees great potential for growth, since most seniors, or their families, find long-term care on their own, without anyone paying a fee.

Temple said most families using A Place for Mom have been very satisfied. On Wednesday, at her urging, scores of Washington families e-mailed The Times with praise for the company.

The company announced plans to expand overseas. “There are so many seniors who need our help,” Temple said.

FACE TO FACE

Birger and Lillian Anderson met by chance on a West Seattle dance floor in the mid-1950s and never parted. Both 85 years old, they sat together on a couch last month and said goodbye to their Bellevue house.

They had wrestled for years with the decision to move into an assisted-living facility in Redmond, reluctant to trade thousands of square feet for hundreds, to shed a lifetime of possessions for a precious few.

Les Ostermeier, owner of Choice Advisory, a Mill Creek-based placement company, sat in a nearby armchair. This was one of many meetings with the couple.

Choice Advisory, founded in 1993 and one of Washington's oldest placement companies, represents the other end of the spectrum from such competitors as A Place for Mom. A regional company, Choice has 21 employees who inspect facilities and meet face-to-face with seniors and their families.

“I'm dismayed at how Internet-based companies are flourishing,” Ostermeier said. “I think you have to personally get to know the people you're trying to help.”

Although the company maintains a website, its most potent calling card is a free magazine, Choice, which

he distributes in many hospitals and medical office waiting rooms.

The 200-plus-page magazine contains paid ads as well as free listings for nursing homes and assisted-living facilities. Adult homes have to pay \$650 to be listed. Ostermeier does not screen advertisers.

The other half of his business is making referrals to homes. He said employees scour enforcement actions posted online by state regulators. Choice removes homes with serious violations from its referral list, he said. His veteran referral brokers make at least \$70,000 a year, but it's not easy. Many families want to meet in the evening, on weekends or on holidays when the entire family can be more easily gathered, Ostermeier said.

"People think we're swimming in money but we're not," he said. "Some years have been very difficult."

SMALL SCALE

Two years ago, after witnessing assembly-line tactics of large placement services, Brandon O'Larey vowed to do better.

His mother, a licensed practical nurse, struggled to fill beds at her Lakewood, Pierce County, adult family home, he said. A Place for Mom sent her dozens of unsolicited e-mail offers of available seniors.

"I hope this is a great resident for you! Give them a call and let me know how it goes. Thanks and good luck!" a broker wrote in a May 2009 message. It concluded with a sales tip: "Don't be afraid to be pleasantly persistent! Keep calling — they really need your help."

Yet when O'Larey or his mother called the potential residents, families were often angry and hung up, O'Larey said. A Place for Mom had sent the same offers simultaneously to numerous other adult homes.

"It was like throwing a piece of meat to a pack of starving dogs," O'Larey said. The inundated families resented the flood of sales pitches.

His mother closed the home in 2009 because she could not fill all her beds and make enough money.

O'Larey, 25, said he was dismayed by the process. No brokers visited his mother's adult home. No attempt was made to determine its quality. Referrals were conducted on a faceless, long-distance basis.

"I couldn't believe they did so little



ALAN BERNER / THE SEATTLE TIMES

After witnessing the methods of large placement services, Brandon O'Larey saw a need for more personalized service. He owns the fledgling business Careful Placement Adult Home Agency, based in his home office in Tacoma.

work and charged so much," O'Larey said.

So he opened up Careful Placement Adult Home Agency, determined to offer personal service. He's one of dozens of placement companies that operate on a shoestring from a home office in Tacoma.

He collects the industry's standard finder's fee — one month's rent — for each resident he places. Working alone, he makes a few thousand dollars a month at best, and supplements his income substitute teaching at a high school in Tacoma.

Last month he visited Mama's Delight adult home in University Place, where he has placed four elderly women.

He'd already received his commission. This was a follow-up call, and he brought flowers for one of the women, who recently had a stroke.

The owner, Zelpha Coats, opened her five-bed home in 2009. State surveys give the home high marks. The three women who still live there told The Times that they were happy with their care.

Still, she has two empty beds. "It's more difficult than ever to attract seniors right now," Coats said.

She appreciates O'Larey's help. Even so, "I wish I didn't have to pay

thousands of dollars to fill a bed. But I have no choice — if I want to stay in business."

Michael J. Berens: mberens@seattletimes or 206-464-2288.

What to look for when considering eldercare options

Placement service checklist

If you decide to use an eldercare-placement company, here are key questions to consider:

✓ **Does the company inspect and check enforcement histories of adult family homes or other facilities?**

Some companies refer the elderly to any adult home that pays them a commission, without doing any screening.

✓ **Are commission rates disclosed?**

Be wary of companies that mask commissions. Most charge adult homes the equivalent of a month's rent for a resident.

✓ **Will the company meet with you to assess medical needs?**

Some services simply provide lists of adult homes in your area that have vacancies. Determine if you prefer face-to-face meetings to get answers to your questions.

✓ **Does the company arrange tours of adult homes?**

Some require families to arrange their own visits. Others accompany families on visits.

✓ **Who does the medical assessment?**

State law requires seniors to obtain a medical assessment before being admitted to an adult home. Make sure a qualified nurse or doctor does the assessment. Check it for accuracy.

Adult family home checklist

Here are the steps to check the quality of an adult family home:

✓ **Check enforcement history.**

Recent enforcement actions are found at a Department of Social and Health Services website: www.aasa.dshs.wa.gov/Lookup/AFHRequestv3.asp

Or call a DSHS regional office: King County: 253-234-6001; Kitsap, Pierce counties: 253-983-3849; Island, San Juan, Skagit, Snohomish, Whatcom counties: 360-651-6850.

✓ **Does the owner live in the home? Who actually provides care?**

Many owners do not live in their adult home but employ a manager to oversee day-to-day care. It's important to meet the actual caregivers and ask about their training and qualifications.

✓ **What are the scheduled activities?**

Access to daily activities is important for active seniors. Does the home provide transportation to stores or recreation? Does it schedule activities such as exercise classes and games?

✓ **What are the staffing levels?**

Staffing is a critical measure of good care. Determine whether the home has 24-hour staffing. If not, how does a disabled or bedridden resident get to a restroom at night? How does a resident summon help at night?

✓ **Conduct unscheduled tours.**

Visit on a normal day and observe how many staffers are present. Is the refrigerator stocked with healthy foods? Do residents appear happy?

✓ **Ask for references.**

Collect information from families of former residents.

Reader response

An assortment of comments following the September 2010 installments.

“Thank you for your coverage on adult family homes. As a member of the King County Elder Abuse Task Force, and the wife of a volunteer ombudsman who covers these homes (he’s actually assigned to a nursing home), I applaud you and the Seattle Times for this terrific coverage. It’s about time. I think these articles will go along ways towards bringing this shameful situation into the light. ... Great job.” — *Terri Kimball*

“Thank you for your article. I wish my family would have had this information before moving my father to one. Sadly we are approaching the one year anniversary of his death that occurred NOT TO HIS DISEASE but to the negligence of the home that we now find out had many complaints, little and no training, that added to his suffering. Please continue to get the word out to the public.” — *K. Milt*

“Today i read your story about death and neglect in adult homes. Thank you so much for opening my eyes to this disgraceful problem. I sent this story to my mother-in-law in Ohio. She and her husband are looking into an adult home for her elderly and ill mother-in-law. Even though its all the way in Ohio you and your contributors to this story possibly just saved the life of an already fragile woman! Thanks again!” — *Renee Blake*

“Mike, I just wanted to let you know that I think that today’s article is brilliant and well-researched and powerful. I am so impressed with the integrity and quality of your work, and so grateful that you have chosen to address these issues. It is an honor to be part of what you’re doing.” — *Page Ulrey (King County deputy prosecutor featured in the series)*

This powerful, poignant note is from the daughter-in-law of the woman featured in the centerpiece story on unreported deaths:

“I’m not sure what words to use because nothing seems quite right or sufficient enough to express our gratitude for your tenacious efforts in raising awareness around the criminal mistreatment taking place in adult family homes. James and I would also like to extend our thanks to your editor and the Seattle Times for prioritizing the need to tell these stories. “The stories you are revealing from your investigations are incredibly disturbing and overwhelmingly heartbreaking. It seems impossible that such heinous acts could go unnoticed or worse, ignored. We desperately wanted to believe that the excuses were legitimate - that they really did care. In retrospect, we knew in our hearts that things weren’t right. If there’s anything to learn here, it’s to trust your instincts. Make the call. Raise hell. You can always apologize to the caregiver or homeowner later but unfortunately in our case, there is no apology we can offer Jean. “Of course, we know that you didn’t publish these stories to make us feel guilty -- in fact you’ve vindicated us in many ways. We take such comfort in knowing how your efforts will surely help facilitate more oversight and greater attention and advocacy for our senior citizens. And we couldn’t be more grateful for the chance to tell Jean’s story. “From the bottom of our hearts, thank you. You’ve changed our lives.” — *Cheri and James Rudolph*