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

01/12/2026

BAYVIEW MANOR HOMES
BAYVIEW MANOR HOMES
11 W Aloha St
Seattle, WA 981199963

RE: BAYVIEW MANOR HOMES # 162

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 70907 (Completion Date 01/12/2026) and 68372 (Completion Date 11/19/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 01/12/2026 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2483 Tuberculosis One test. The assisted living facility is only required to have a staff person take one test if the staff person has any of the following:

(2) A documented negative result from one skin or blood test in the previous twelve months.

WAC 388-78A-2450 Staff.

(2) The assisted living facility must:

(c) Verify prior to hiring that staff persons have the required licenses, certification, registrations, or other credentials for the position, and that such licenses, certifications, registrations, and credentials are current and in good standing;

WAC 388-78A-2210 Medication services.

(1) An assisted living facility providing medication service, either directly or indirectly, must:

(a) Meet the requirements of chapter 69.41 RCW Legend drugs Prescription drugs, and other applicable statutes and administrative rules; and

(b) Develop and implement systems that support and promote safe medication service

for each resident.

(2) The assisted living facility must ensure the following residents receive their medications as prescribed, except as provided for in WAC 388-78A-2230 and 388-78A-2250 :

(a) Each resident who requires medication assistance and his or her negotiated service agreement indicates the assisted living facility will provide medication assistance; and

(b) If the assisted living facility provides medication administration services, each resident who requires medication administration and his or her negotiated service agreement indicates the assisted living facility will provide medication administration.

The Department staff who did the On Site verification:

Faith Le, NCI
Erin Steinbrenner, Nursing Consultant Institutional

If you have any questions, please contact me at (253)312-1446.

Sincerely,

Jamie Singer

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

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

Statement of Deficiencies	License #: 162	Compliance Determination # 68372
Plan of Correction	BAYVIEW MANOR HOMES	Completion Date
Page 1 of 8	Licensee: BAYVIEW MANOR HOMES	11/19/2025

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Assisted Living Facility license.

The department completed data collection for the unannounced on-site full inspection on 11/12/2025 and 11/14/2025 of:
BAYVIEW MANOR HOMES
11 W Aloha St
Seattle, WA 981199963

The following sample was selected for review during the unannounced on-site visit: 7 of 38 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Faith Le, NCI
Erin Steinbrenner, Nursing Consultant Institutional

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

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Page 2 of 8	Licensee: BAYVIEW MANOR HOMES	11/19/2025

As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Jessie Seigen
Residential Care Services

11/24/2025
Date

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

Pamela Yee
Administrator (or Representative)

12/1/2025
Date

WAC 388-78A-2483 Tuberculosis One test. The assisted living facility is only required to have a staff person take one test if the staff person has any of the following:

(2) A documented negative result from one skin or blood test in the previous twelve months.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 1 staff member (Staff A) completed the required one-step tuberculin skin test (TST). This placed 38 residents at risk of exposure to a communicable disease.

Findings included...

Record review showed the ALF hired Staff A (Nurse Assistant Certified) on 07/16/2024. Record review showed Staff A had documented history of a negative result from a one-step TST completed on 01/03/2024, prior to their employment. Record review showed no TST completed after date of hire.

In interview, on 11/13/2025 at 1:00 PM, Staff F (Human Resource Director) stated "we only have the one-step TST she [Staff A] provided. We didn't get another one [after date of hire] because this was done in the last year."

Statement of Deficiencies	License #: 162	Compliance Determination # 68372
Plan of Correction	BAYVIEW MANOR HOMES	Completion Date
Page 3 of 8	Licensee: BAYVIEW MANOR HOMES	11/19/2025

Plan/Attestation Statement

I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, BAYVIEW MANOR HOMES is or will be in compliance with this law and / or regulation on (Date) 01/03/2026 .

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

Administrator (or Representative) Pamela J Lyon Date 12/1/2025

WAC 388-78A-2450 Staff.

(2) The assisted living facility must:

(c) Verify prior to hiring that staff persons have the required licenses, certification, registrations, or other credentials for the position, and that such licenses, certifications, registrations, and credentials are current and in good standing;

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 5 staff (Staff B) obtained the required licensing credentials for their position. This failure resulted in 38 residents receiving care from staff who were unlicensed in the state of Washington.

Findings included...

Review of staff records, on 11/13/2025, showed the ALF hired Staff B (Licensed Practical Nurse-LPN) on 04/07/2025, and they were currently employed and actively providing care in the ALF.

Review of the Washington State Provider Credential Search (PCS) online database, on 11/13/2025, showed Staff B did not have an active Washington State credential (license) to work as an LPN.

In interview, on 11/13/2025 at 1:15 PM, Staff F (Human Resource Director) confirmed Staff B was employed full time as an LPN. Staff F was unable to provide documentation for Staff B's Washington State LPN credentials.

Statement of Deficiencies	License #: 162	Compliance Determination # 68372
Plan of Correction	BAYVIEW MANOR HOMES	Completion Date
Page 4 of 8	Licensee: BAYVIEW MANOR HOMES	11/19/2025

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

Administrator (or Representative) [signature] Date 12/01/2025

WAC 388-78A-2210 Medication services.

(1) An assisted living facility providing medication service, either directly or indirectly, must:

(a) Meet the requirements of chapter 69.41 RCW Legend drugs Prescription drugs, and other applicable statutes and administrative rules; and

(b) Develop and implement systems that support and promote safe medication service for each resident.

(2) The assisted living facility must ensure the following residents receive their medications as prescribed, except as provided for in WAC 388-78A-2230 and 388-78A-2250 :

(a) Each resident who requires medication assistance and his or her negotiated service agreement indicates the assisted living facility will provide medication assistance; and

(b) If the assisted living facility provides medication administration services, each resident who requires medication administration and his or her negotiated service agreement indicates the assisted living facility will provide medication administration.

This requirement was not met as evidenced by:

Based on observations, interviews and record reviews, the Assisted Living Facility (ALF) failed to ensure safe medication systems were implemented when 5 of 6 residents (Residents 1, 2, 3, 6 and 7) did not get their medications as prescribed and 1 of 1 resident (Resident 4) who could not safely self-administer medication was assessed as independent. These failures resulted in Residents 1, 2, 3, 6 and 7 not receiving their medications as prescribed, placed Resident 4 at risk of medication errors, and all sampled residents at risk for health complications or adverse medication effects.

Findings included...

Medication Administration Records

Record review, on 11/13/2025 at 11:55 AM, showed the ALF had a paper Medication Administration Record (MAR) for each resident with a box for initials of the staff member to document the medication was given.

Resident 1
Review of a Face Sheet showed the ALF admitted Resident 1 on [redacted]/2022 with a primary diagnosis of [redacted] Review of an Assessment, dated 05/21/2025, showed Resident 1 required medication administration assistance three times daily.

Review of Resident 1's September 2025 MAR showed no staff initials indicating Resident 1 received
- acetaminophen (used to treat pain) on 09/05/2025 at 2:00 PM and 09/23/2025 at 2:00 PM.
- risperidone (used to treat anxiety or agitation) on 09/16/2025 at 5:00 PM.
- oxycodone (used to treat pain or shortness of breath) on 09/16/2025 at 5:00 PM.

Review of Resident 1's October 2025 MAR, showed no staff initials indicating Resident 1 received
- oxycodone on 10/19/2025 at 5:00 PM.
- risperidone on 10/19/2025 at 5:00 PM.

Resident 2
Review of a Face Sheet showed the ALF admitted Resident 2 on [redacted]/2023 with multiple diagnoses to include [redacted]. Review of an Assessment, dated 10/24/2025, showed Resident 2 required staff assistance with medication administration once daily.

Review of Resident 2's September 2025 MAR showed no staff initials indicating Resident 2 received mirtazapine (used to treat depression) on 09/19/2025 at 6:00 PM.

Resident 3
Review of a Face Sheet showed the ALF admitted Resident 3 on [redacted]/2020 with multiple diagnoses to include [redacted] Review of an Assessment, dated 03/21/2025, showed Resident 3 required staff assistance to manage medication administration, blood sugar checks and insulin (a hormone produced by the pancreas that regulates blood sugar levels) administration three or more times daily.

Review of Resident 3's September 2025 MAR showed no staff initials indicating Resident 3 received
- calcium carbonate (used to treat indigestion) on 09/19/2025 at 1:00 PM.
- humalog insulin on 09/15/2025 and 09/16/2025 at 5:00 PM.

Review of Resident 3's October 2025 MAR, showed no staff initials indicating Resident 3 received
- blood sugar check on 10/17/2025 and 10/25/2025 at 12:00 PM.
- Tresiba insulin on 10/10/2025 at bedtime.
- humalog insulin on 10/17/2025 at 12:00 PM.
- sulfamethoxazole-trimethoprim (antibiotic used to treat infection) on 10/24/2025 at 8:00 PM.

Resident 6
Record review showed Resident 6 was admitted into the ALF on [redacted] 2025 with multiple diagnosis including [redacted] and [redacted]
Review of an Assessment, dated 10/31/2025, showed Resident 6 required medication administration three times daily.

Review of Resident 6's October 2025 MAR showed no staff initials indicating Resident 6 received
- carbidopa/levodopa (used to treat symptoms of Parkinson's disease) on 10/29/2025 at 5:00 PM.
- latanoprost (used to treat glaucoma) on 10/29/2025 at 5:00 PM.

Review of Resident 6's November 2025 MAR, showed no staff initials indicating Resident 6 received memantine (used to treat Alzheimer's disease) on 11/09/2025 at 5:00 PM.

Resident 7
Review of a Face Sheet showed the ALF admitted Resident 7 on [redacted] 2024 with multiple diagnoses to include [redacted] Review of an Assessment, dated 03/21/2025, showed Resident 7 required medication administration one time daily.

Review of Resident 7's September 2025 MAR showed no staff initials indicating Resident 7 received
- levothyroxine (used to treat an underactive thyroid gland) on 09/16/2025 at 7:00 AM.
- nystatin (used to treat skin infection) on 09/22/2025 after midday hour (PM) and 09/28/2025 before midday hour (AM).
- clinpro (a fluoride treatment) on 09/30/2025 at bedtime.
- gabapentin (used to treat seizures) on 09/30/2025 at 8:00 PM.
- mirtazapine (used to treat depression) on 09/30/2025 at 8:00 PM.

Review of Resident 7's October 2025 MAR, showed no staff initials indicating Resident 7 received
- atorvastatin (used to treat high cholesterol) on 10/29/2025 and 10/30/2025 at 8:00 AM.
- losartan (used to treat high blood pressure) on 10/30/2025 at 8:00 AM.
- meloxicam (used to treat pain) on 10/30/2025 at 8:00 AM.

- a supplement vitamin B-12 on 10/30/2025 at 8:00 AM.
- clinpro on 10/30/2025 at 8:00 AM.
- nystatin on 10/08/2025 and 10/29/2025 after midday hour and 10/30/2025 before midday hour.

In an interview, on 11/13/2025 at 11:55 AM, Staff H (Licensed Practical Nurse) confirmed that if a medication signature box on a MAR is unsigned "it would mean it wasn't given."

In an interview, on 11/14/2025 at 9:18 AM, Staff G (Social Service Director) stated that she "spoke with the nurses about the [unsigned] MARS and yes if it is unsigned, if not documented, then we have to assume the medications were not given."

Medication Self-Administration

Resident 4
Record review showed Resident 4 was admitted into the ALF on [redacted]2025 with multiple diagnosis including [redacted] and [redacted]

Record review of Resident 4's "Dementia Screening Tool," dated 08/05/2025, showed Resident 4 had evidence of short-term memory loss, was not oriented to place and time, and had identified characteristics of dementia. Record review of Resident 4's undated "Self-Administration of Medications Assessment," showed Resident 4 was unable to recall events from their past and unable to organize daily routine and make consistent, reasonable and organized decisions.

However, record review showed after assessments determined Resident 4 was not oriented, had short term memory loss, and unable to organize daily routine, the ALF documented on the Self-Administration of Medications Assessment, the Full Assessment dated 08/20/2025, and the Service Plan dated 08/21/2025, that Resident 4 was capable for self-administration of her medications, was independent with medication management and required, "no assistance needed with ordering, organization or storing medications."

Record review of Resident 4's September, October, and November 2025 MAR showed Resident 4 was independent with her medication twice daily, at 8:00 AM and 5:00 PM.

Observation and interview, on 11/14/2025 at 1:42 PM, showed Resident 4 in her apartment. On the countertop of the bathroom were medication bottles and a medi-set (a system that helps organize medications). Observation showed a bottle of Tylenol (used to treat pain) and a bottle of felodipine (used to treat high blood pressure). The medi-set was observed to have some slots filled with various medications, while other

slots were empty. The 8:00 AM medication dosage for 11/14/2025 showed to still have medication inside the slot. When asked if she had taken her morning medication, Resident 4 stated she could not recall if she had taken her medication that morning. Resident 4 was unable to report her medication dosage information.

In interview, on 11/14/2025 at 2:00 PM, Staff H (Licensed Practical Nurse) confirmed Resident 4 was independent with her medication management, and the ALF did not provide any assistance with Resident 4's medication management.

In interview, on 11/14/2025 at 2:42 PM, Staff G (Director of Social Services) reported if Resident 4 was assessed as not oriented in time or place, she would not be able to take her medication independently.

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

Pamela Yco — 12/01/2025

Administrator (or Representative) — Date