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

01/07/2025

Pacifica Kenmore LLC
Kenmore Senior Living
7221 NE 182nd St
Kenmore, WA 98028

RE: Kenmore Senior Living # 2566

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 52625 (Completion Date 01/07/2025) and 49502 (Completion Date 11/01/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 01/07/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2730 Licensee's responsibilities.

(1) The assisted living facility licensee is responsible for:

(b) Complying at all times with the requirements of this chapter, chapter 18.20 RCW, and other applicable laws and rules; and

The Department staff who did the On Site verification:
Hayley Pinkham, ALF Licensor

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

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 an unannounced on-site follow-up on 10/29/2024 and 10/29/2024 of:

Kenmore Senior Living
7221 NE 182nd St
Kenmore, WA 98028

This document references the following SOD dated: 11/01/2024

The following sample was selected for review during the unannounced on-site visit: 64 of 64 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Hayley Pinkham, ALF Licensor

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

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.

Staci Dilg, IDR PM for Reg 2J — December 16, 2024

Residential Care Services — 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.

Administrator (or Representative)

Jan. 2nd, 2025
Date

WAC 388-78A-2730 Licensee's responsibilities.

(1) The assisted living facility licensee is responsible for:

(b) Complying at all times with the requirements of this chapter, chapter 18.20 RCW, and other applicable laws and rules; and

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living facility (ALF) failed to follow a Respiratory Protection Program (RPP) by ensuring 2 of 17 healthcare workers (HCW) (Staff B and C) were fit-tested for the appropriate respirator masks annually. This failure placed 64 residents at risk for exposure to COVID -19 (is an infectious disease by a virus causing respiratory illness with symptoms including cough, fever, new or worsening malaise, headache, or new dizziness, nausea, vomiting, diarrhea, loss of taste or smell, and in severe cases difficulty breathing that could result in severe impairment or death).

Findings included...

NOTE: Washington Administrative Code (WAC) 296-842-12005 stated all long term-care facilities were required to develop and maintain an RPP.

NOTE: Review of a "Dear Administrator" letter, dated 04/30/2021, showed the Department informed ALFs of their responsibility to develop and maintain an RPP. An RPP is defined by Department of Health as a "federal and state OSHA (Occupational Safety and Health Administration) requirement to protect workers from exposure to respiratory hazards." The ALF were required to provide initial fit-tests for each HCW with the same model, style, and size respirator that the HCW would be required to wear for protection against COVID-19 and airborne hazards, and annually thereafter. The ALF were required to provide fit-tested respirators, such as N95, to all HCWs with the potential to have contact with residents with known or suspected COVID-19.

NOTE: WAC 296-842-15005 Conduct fit testing. 1. Fit testing is an activity where the seal of a respirator is tested to determine if it's adequate. 2. This section covers general requirements for fit testing. Specific fit testing procedures are covered in WAC 296-842-22010. (1) Provide, at no cost to the employee, fit tests for ALL tight-fitting respirators on the following schedule:(a) Before employees are assigned duties that may require the use of respirators; (b) At least every twelve months after initial testing.

Record review of the ALF's respirator mask fit-test records showed Staff B's fit test was conducted on 01/01/2023 and expired on 01/01/2024. The records showed Staff C's fit test was conducted on 01/03/2023 and expired on 01/03/2024.

In interview, on 10/29/2024 at 1:57 PM, Staff C stated most of the HCW's were tested a week ago. Staff C stated she did not get fit tested at that time. Staff C confirmed she provided direct care to COVID-19 positive residents.

In interview, on 11/01/2024 at 12:46 PM, Staff A (Executive Director) confirmed that Staff B and Staff C's respirator mask fit-tests had not been renewed annually.

This is an uncorrected citation previously cited on 09/06/2024 and a recurring citation previously cited on 12/20/2022.

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, Kenmore Senior Living is or will be in compliance with this law and / or regulation on (Date) Dec 1, 2024 .

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

Administrator (or Representative) — Date: Jan 2nd, 2024

Residential Care Services
Investigation Summary Report

Provider/Facility: Kenmore Senior Living

Provider Type: Assisted Living Facility

License/Cert.#: 2566

Intake ID: 143692

Compliance Determination #: 46634

Region/Unit #: RCS Region 2 / Unit J

Investigator: Hayley Pinkham

Investigation Date(s): 09/04/2024 through 09/06/2024

Complainant Contact Date(s): 09/06/2024

Allegation(s):

1) The Assisted Living Facility (ALF) has positive COVID cases.
2) The ALF's elevator has been broken for quite a while

Investigation Methods:

Sample:	Total residents: 69 Resident sample size: 2 Closed records sample size:
Observations:	Residents Dining Resident rooms Staff to resident interactions Resident to resident interactions Medication administration Resident care equipment
Interviews:	Nursing staff Residents
Record Reviews:	Medical records Facility policies Personnel files

Investigation Summary:

1) Interview, and record review showed the ALF followed Covid guidelines for testing residents. The ALF did not notify the DOH per guidelines for identifying Covid positive residents. The ALF did not implement their Respiratory Protection Policy for fit testing staff. Deficient practice identified, see Statement of Deficiencies dated 9/6/2024.
2) Observation showed the second elevator is out of order. Interview and record review showed the ALF is working with the vendor in a timely manner as able to repair the elevator door. No findings of deficient practice.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

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Statement of Deficiencies	License #: 2566	Compliance Determination # 46634
Plan of Correction	Kenmore Senior Living	Completion Date
Page 1 of 5	Licensee: Pacifica Kenmore LLC	09/06/2024

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 an unannounced on-site complaint investigation on 09/04/2024 and 09/04/2024 of:

Kenmore Senior Living
7221 NE 182nd St
Kenmore, WA 98028

This document references the following complaint number(s): 143692

The following sample was selected for review during the unannounced on-site visit: 2 of 69 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Hayley Pinkham, ALF Licensor

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

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.

Jamie Singer
Residential Care Services

9/9/2024
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.

Administrator (or Representative) 9/19/2024 Date

WAC 388-78A-2610 Infection control.

(2) The assisted living facility must:

(f) Report communicable diseases in accordance with the requirements in chapter 246-100 WAC.

This requirement was not met as evidenced by:

Based on record review and interview, the Assisted Living Facility (ALF) failed to notify the Local Health Jurisdiction (LHJ) to report a COVID-19 (an infectious disease by a virus causing respiratory illness with symptoms including cough, fever, new or worsening malaise, headache, or new dizziness, nausea, vomiting, diarrhea, loss of taste or smell, and in severe cases difficulty breathing that could result in severe impairment or death) outbreak. This failure placed 69 residents at risk for acquiring an infectious disease.

Findings included...

Note: Washington Administrative Code (WAC) 246-100-011(5) "Communicable disease" means an illness caused by an infectious agent that can be transmitted from a person, animal, or object to a person by direct or indirect means including, but not limited to, transmission via an intermediate host or vector, food, water, or air.

Note: WAC 246-100-011 (18) "Local health jurisdiction" or "LHJ" means a county health department under chapter 70.05 RCW, city/county health department under chapter 70.08 RCW, or health district under chapter 70.46 RCW.

Note: WAC 246-101-101 Notifiable conditions—Health care providers and health care facilities. Must report Novel coronavirus (COVID-19) immediately to the LHJ.

Note: Review of the Washington State Department of Health's document titled, "Interim COVID-19 Outbreak Definition for Healthcare Settings," updated 01/25/2024, defined an outbreak as: 2 cases of probable or confirmed COVID-19 among residents, with epi-linkage (having contact with somebody who is a confirmed case) and Health Long-Term Care Facilities (LTCF). Threshold for Reporting to Public Health as: 2 cases of probable or confirmed COVID-19 among residents identified within 7 days.

Record review of the ALF's policy "Respiratory Virus", dated 06/01/2024, showed unless otherwise advised by the health department (LHJ) an outbreak is defined as 3 or more

Administrator (or Representative) | Date

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Record review of the ALF's policy "Respiratory Virus", dated 06/01/2024, showed unless otherwise advised by the health department (LHJ) an outbreak is defined as 3 or more

positive COVID-19 cases in the community in a ten (10) day period. The policy showed the Executive Director (Staff A) would handle the communication with the licensing authorities and public health authorities during an outbreak.

Record review of the ALF's Line List (an organized table that contains key information about each case in an outbreak), undated, showed the ALF had 17 COVID-19 positive residents from 08/11/2022 through 09/02/2022.

In interview, on 09/04/20234 at 1:16 PM, Staff A stated he did not notify the LHJ of the COVID-19 outbreak from 08/11/2022 through 09/02/2022.

This deficiency was previously cited on 12/21/2022.

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, Kenmore Senior Living is or will be in compliance with this law and / or regulation on (Date) 10/19/2024 .

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

Administrator (or Representative) 10/19/2024 Date

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Record review of the ALF's policy "Respiratory Protection Protocol", dated January 2023, showed all employees required to wear filtering facepiece respirators for high and extremely high-risk tasks must pass an initial fit test before using a respirator and fit test annually.

Record review of the ALF's current employee list showed the ALF had 27 HCW's that provided direct care to residents.

Record review showed the ALF had a binder in which they kept HCW's fit test documentation. All the documentation showed HCW's fit tests had not been renewed annually.

In interview, on 09/05/2024 at 3:30 PM, Staff A (Executive Director) Staff A confirmed that all 27 HCW's fit tests had not been renewed annually.

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Administrator (or Representative) 9/19/2024 Date

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Administrator (or Representative) Date