



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

Aegis Senior Communities LLC
Aegis Living Greenwood
10000 Holman Rd NW
Seattle, WA 98177

RE: Aegis Living Greenwood License # 2617

Dear Administrator:

This letter addresses Compliance Determination(s) 59498 (Completion Date 05/13/2025) and 54582 (Completion Date 03/24/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 05/13/2025 and found no deficiencies. Your facility meets the Assisted Living Facility licensing requirements.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2474-2-d, WAC 388-78A-2480, WAC 388-78A-2480-1, WAC 388-78A-2480-2

The Department staff who did the off-site verification:

Sunny Kent, Licensors
Scottie Sindora, ALF Licensors

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



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20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 2617	Compliance Determination # 54582
Plan of Correction	Aegis Living Greenwood	Completion Date
Page 1 of 4	Licensee: Aegis Senior Communities LLC	03/24/2025

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 03/17/2025 and 03/19/2025 of:

Aegis Living Greenwood
10000 Holman Rd NW
Seattle, WA 98177

The following sample was selected for review during the unannounced on-site visit: 9 of 80 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Sunny Kent, Licenser
Scottie Sindora, ALF Licenser

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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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.

Jennie Singer
Residential Care Services

3/25/2025
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.

[Signature]
Administrator (or Representative)

3/26/2025
Date

WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(d) Cardiopulmonary resuscitation and first aid; and

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure that 1 of 5 sampled staff (Staff B) completed in-person CPR training. This left the ALF's 80 residents at risk for receiving care from staff without up-to-date emergency care training.

Findings included...

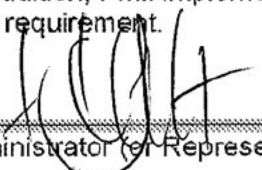
Note: Washington Administrative Code (WAC) 388-112A-0700 - What is CPR training? Cardiopulmonary resuscitation (CPR) training is training provided by an authorized CPR instructor. Trainees must successfully complete the written and skills demonstration tests. WAC 388-112A-0710 What is CPR/first-aid training? CPR/first-aid training is training that meets the guidelines established by the Occupational Safety and Health Administration (OSHA). Under OSHA guidelines, training must include hands on skills development through the use of mannequins or trainee partners.

Record review of an undated Resident Characteristic Roster showed the ALF provided care and services for 80 residents. 34 residents resided on a locked Memory Care Unit (MCU).

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Record review of an undated employee list showed the ALF hired Staff B (Wellness Nurse) on 07/18/2024. Staff B completed on-line CPR training, without the hand-on skills component, on 04/26/2024 with the "National CPR Foundation." The National CPR Foundation is an online-only training entity. It does not offer a hands-on component for staff to demonstrate competence with chest compressions and other skills necessary for CPR, as required by OSHA.

During an interview on 03/19/2025 at 8:50 AM with Staff E (General Manager), Staff F (Health Services Director), and Staff G (Business Office Manager), they stated that they interviewed Staff B and confirmed Staff B did not complete an OSHA-approved CPR course.

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, Aegis Living Greenwood is or will be in compliance with this law and / or regulation on (Date) <u>5/8/2025</u>	
SB confirmed ammended POC date with provider on 3/27/2025.	
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.	
 Administrator (or Representative)	<u>3/26/2025</u> Date

WAC 388-78A-2480 Tuberculosis Testing Required.

- (1) The assisted living facility must develop and implement a system to ensure each staff person is screened for tuberculosis within three days of employment.
- (2) For purposes of WAC 388-78A-2481 through 388-78A-2489, "staff person" means any assisted living facility employee or temporary employee of the assisted living facility, excluding volunteers and contractors.

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 sampled staff (Staff C) initiated tuberculosis (TB) testing within three days of hire. This placed 80 residents at risk for contact with a staff person whose TB status was unknown to the ALF.

Findings included...

Record review of an undated Resident Characteristic Roster showed the ALF provided care and services for 80 residents. 34 residents resided on a locked Memory Care Unit

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(MCU).

Record review of an undated employee list showed the ALF hired Staff C (Housekeeper) on 01/19/2024. Review of employee files for Staff C showed the ALF initiated Staff C's TB testing on 02/06/2024, 18 days after their date of hire.

During an interview on 03/19/2025 at 11:55 AM, Staff E (General Manager), stated that they thoroughly searched Staff C's employee records and found documentation that showed Staff C may have been ill and missed several days of work right after the 01/19/2024 date of hire. They could not locate any further documentation to confirm a reason for the gap between the hire date and the first TB test.

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, Aegis Living Greenwood is or will be in compliance with this law and / or regulation on (Date) 5/19/2025

SB confirmed ammended POC date with provider on 3/27/2025.

5/8/2025

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



Administrator (or Representative)

3/26/2025

Date