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

11/05/2024

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) 49850 (Completion Date 11/05/2024) and 46111 (Completion Date 09/10/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 11/05/2024 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:

(a) The operation of the assisted living facility;

(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:
Cathy Prentice, Complaint Investigator

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

Sincerely,

Jamie Singer, Field Manager

This document was prepared by Residential Care Services for the Locator website.

Region 2, Unit J
Residential Care Services

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Residential Care Services
Investigation Summary Report

Provider/Facility: BAYVIEW MANOR HOMES **Provider Type:** Assisted Living Facility

License/Cert.#: 162
Intake ID: 144124
Compliance Determination #: 46111
Region/Unit #: RCS Region 2 / Unit J
Investigator: Cathy Prentice
Investigation Date(s): 08/23/2024 through 09/10/2024
Complainant Contact Date(s):

Allegation(s):
The facility had a COVID outbreak of 15 residents and 4 staff.

Investigation Methods:

Sample:	Total residents: 44 Resident sample size: 3 Closed records sample size: 0
Observations:	Residents; delivery of care and services; staff interactions with residents; residents' appearance; environment, Infection Control practices.
Interviews:	Residents, staff, administration,
Record Reviews:	Infection Control (IC) investigation: IC line list reports, Respiratory Protection Program (RPP), and facility policies, resident records.

Investigation Summary:
Observation, interview and record review showed, the facility had no hospitalizations or deaths from Covid19 infection.
The outbreak still had two residents on isolation at the time of this investigation. The facility had Infection Control systems and policies for delivery of care and services in place as required except the facility failed to have medical evaluations available or on file for 17 of 37 staff as required. The facility stated they were done but they could not find them.

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 #: 162	Compliance Determination # 46111
Plan of Correction	BAYVIEW MANOR HOMES	Completion Date
Page 1 of 3	Licensee: BAYVIEW MANOR HOMES	09/10/2024

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 08/23/2024 and 08/23/2024 of:

BAYVIEW MANOR HOMES
11 W Aloha St
Seattle, WA 981199963

This document references the following complaint number(s): 142330, 144124

The following sample was selected for review during the unannounced on-site visit: 3 of 44 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Cathy Prentice, Complaint Investigator
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.

Jessie Seigen — Residential Care Services

9/11/2024 — 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.

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Statement of Deficiencies	License #: 162	Compliance Determination # 46111
Plan of Correction	BAYVIEW MANOR HOMES	Completion Date
Page 2 of 3	Licensee: BAYVIEW MANOR HOMES	09/10/2024

Administrator (or Representative) 9/19/24 Date

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

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

(a) The operation of the assisted living facility;

(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 failed to follow a Respiratory Protection Program (RPP) by ensuring medical clearance for respirator mask records were complete and available. This failure resulted in 17 of 37 healthcare workers (HCW) not having records of medical clearance to use respirator masks and placed 44 residents at risk for respiratory infection.

Findings included...

NOTE: 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 the Department of Health as a "federal and state OSHA (Occupational Safety and Health Administration) requirement to protect workers from exposure to respiratory hazards."

NOTE: WAC 296-842-12010 Keep respirator program records. (4) Keep written recommendations from the LHCP (Licensed Health Care Provider). Reference: See chapter 296-802 WAC, Employee medical and exposure records (5) You must allow affected employees and their representatives to examine and copy records required by this section.

Record review of staff list of HCWs received from Staff A (Administrator), on 09/04/2024 at 1:04 PM, showed the ALF had 37 HCW who provided direct care to the residents.

In a statement via email, on 09/04/2024 at 2:16 PM, Staff A stated the ALF could not find medical evaluation records for 17 HCWs who had respirator mask fit testing in 2024.

In an interview, on 09/09/2024 at 1:30 PM, Staff A stated the ALF had 17 out of 37 HCS's

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Statement of Deficiencies	License #: 162	Compliance Determination # 46111
Plan of Correction	BAYVIEW MANOR HOMES	Completion Date
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without medical clearance records on file because the ALF could not find them.

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) 10/25/24 .

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

Administrator (or Representative) — Date: 9/19/24

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