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

FH LLC
THE TERRACES AT SKYLINE
715 9TH AVE
SEATTLE, WA 98104

RE: THE TERRACES AT SKYLINE License # 2054

Dear Administrator:

This letter addresses Compliance Determination(s) 56137 (Completion Date 03/18/2025) and 53010 (Completion Date 01/29/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 03/18/2025 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-2474-4, WAC 388-78A-2474-2

The Department staff who did the on-site verification:
Lisa Hauk, Complaint Investigator

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

Residential Care Services
Investigation Summary Report

Provider/Facility: THE TERRACES AT SKYLINE
License/Cert.#: 2054
Compliance Determination #: 53010
Investigator: Lisa Hauk
Investigation Date(s): 01/13/2025 through 01/29/2025
Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 159317
Region/Unit #: RCS Region 2 / Unit J

Allegation(s):

The Named Resident (NR) was verbally and mentally abused by Named Staff (NS) at the Assisted Living Facility (ALF).

Investigation Methods:

Sample:	Total residents: 61 Resident sample size: 3 Closed records sample size: 0
Observations:	Identified resident Residents Activities Dining Resident rooms Staff to resident interactions Resident to resident interactions
Interviews:	Administration Identified resident Nursing staff Residents Family members
Record Reviews:	Medical records Incident investigation Facility policies Personnel files

Investigation Summary:

Interview and record review showed the incident was reported promptly to supervisors, the ALF responded to the allegation and protected residents by suspending the NS. The ALF followed their policy, investigated and reported the incident per regulatory requirements. After investigation, the ALF could not substantiate abuse or neglect. The NS resigned their position at the ALF. The Department's investigation found the reporter had expired credentials. See citation 388-78A-2474(2)(4).

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 #: 2054	Compliance Determination # 53010
Plan of Correction	THE TERRACES AT SKYLINE	Completion Date
Page 1 of 3	Licensee: FH LLC	01/29/2025

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 an unannounced on-site complaint investigation on 01/13/2025 of:

THE TERRACES AT SKYLINE
715 9TH AVE
SEATTLE, WA 98104

This document references the following complaint number(s): 159317

The following sample was selected for review during the unannounced on-site visit: 3 of 61 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Lisa Hauk, Complaint Investigator

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

Statement of Deficiencies	License #: 2054	Compliance Determination # 53010
Plan of Correction	THE TERRACES AT SKYLINE	Completion Date
Page 2 of 3	Licensee: FH LLC	01/29/2025

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.

Jennie Swigert
Residential Care Services

2/3/2025
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.

WHF
Administrator (or Representative)

02/13/25
Date

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

02/25/25

(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:

(4) The assisted living facility must ensure all persons listed in subsection (2) of this section, obtain the home-care aide certification.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure credentials were active for 1 of 4 sampled staff (Staff B). This failure placed 61 of 61 residents at risk of receiving care and services from uncredentialled staff.

Findings included...

NOTE: Washington Administrative Code (WAC) 388-112A-0060. (a) long-term care worker in ALF must maintain in good standing, the certification or credential.

Record review of an undated staff list showed, Staff B (Certified Nursing Assistant), was hired on 07/08/2024.

Record review of the Washington State Provider Credential Search, on 01/13/2025 , showed Staff B received a Nursing Assistant Certification that expired on 10/02/2024. Staff B did not have an active credential (license) to work as a Nursing Assistant.

Review of ALF staff schedules showed Staff B provided care and services to residents at the ALF for 13 days in October of 2024, 17 days in November of 2024, 14 days in December of 2024 and 2 days in January of 2025.

Interview, on 01/13/2025 at 2:37 PM, Staff A (Director of Health Services) stated that Staff B had been providing care and services to residents without an active credential and the expired credentials was an oversight.

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, THE TERRACES AT SKYLINE is or will be in compliance with this law and / or regulation on (Date) 02/25/25.

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

Administrator (or Representative) — Date: 02/13/25