



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

HORIZON HOUSE
HORIZON HOUSE
900 University St
SEATTLE, WA 98101

RE: HORIZON HOUSE License # 212

Dear Administrator:

This letter addresses Compliance Determination(s) 58918 (Completion Date 05/21/2025) and 55132 (Completion Date 03/03/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 05/21/2025 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-2040-2, WAC 388-78A-2040-1, WAC 388-78A-2040

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, Field Manager
Region 2, Unit J
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: HORIZON HOUSE

Provider Type: Assisted Living Facility

License/Cert.#: 212

Compliance Determination #: 55132

Intake ID: 166726

Investigator: Lisa Hauk

Region/Unit #: RCS Region 2 / Unit J

Investigation Date(s): 02/20/2025 through 03/03/2025

Complainant Contact Date(s):

Allegation(s):

The Assisted Living Facility (ALF) failed their third fire and life safety inspection and was issued a State Fire Marshal's Office Letter of Non-compliance from the Deputy State Fire Marshal.

Investigation Methods:

Sample:	Total residents: 67 Resident sample size: 2 Closed records sample size: 0
Observations:	Residents Resident care equipment Resident rooms Staff to resident interactions Resident to resident interactions
Interviews:	Administration Nursing staff Residents Maintenance staff
Record Reviews:	Resident Characteristic Roster Medical records

Investigation Summary:

Record review of the Washington State Patrol Fire Inspection Report dated 02/03/2025, showed the ALF had not corrected violations from two previous inspections dated 07/11/2024 and 09/25/2024. In an interview, the Administrator said the ALF was in the process of completing upgrades of the kitchen fire system. Citation written for failed Fire Marshal fire and life safety inspections. See WAC 388-78A-2040(1)(2).

Conclusion / Action:

- ☒ 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 #: 212	Compliance Determination # 55132
Plan of Correction	HORIZON HOUSE	Completion Date
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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 02/20/2025 of:

HORIZON HOUSE
900 UNIVERSITY ST
SEATTLE, WA 98101

This document references the following complaint number(s): 166726

The following sample was selected for review during the unannounced on-site visit: 2 of 67 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

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

Statement of Deficiencies	License #: 212	Compliance Determination # 55132
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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

3/5/2025

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.

Lauri Warfield-Lawson, NHA, OTR/L, CCO
Administrator (or Representative)

03/06/2025
Date

WAC 388-78A-2040 Other requirements.

- (1) The assisted living facility must comply with all other applicable federal, state, county and municipal statutes, rules, codes and ordinances, including without limitations those that prohibit discrimination.
- (2) The assisted living facility must have its building approved by the Washington state fire marshal in order to be licensed.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure compliance with the Washington State Patrol Office of State Fire Marshal (OSFM) when the ALF failed their follow-up Fire and Life Safety Inspection (LSI). This placed 67 residents, staff, and visitors' safety at risk.

Findings included...

Review of the Department's Secure Tracking and Reporting System, on 02/20/2024, showed the ALF was licensed for 68 beds. Review of a Resident Characteristics Roster showed the ALF was providing care and services for 67 residents.

Review of records from the OSFM, showed the ALF failed their initial LSI on 07/11/2024. Records showed the ALF failed the first OSFM follow-up visit on 09/25/2024 and a second failed follow up visit on 02/03/2025. The follow up visit on 02/03/2025 showed the ALF failed to comply with the following International Fire Codes (IFC):

Extinguishing System Service –

(IFC 904.13.5.2.2021) – Deficiencies found on report.
Facility is upgrading wet system to UL300.

National Fire Protection Association 80 Fire/Smoke Dampers Inspection and Testing -

At the time of inspection, the following paperwork was not provided: 1. Fire/smoke damper inspection will need to be performed and documented.

In interview, on 02/20/2025 at 2:14 PM, Staff A (Chief Operating Officer) stated that all of the violations listed on the OSFM report were in the process of being completed.

Statement of Deficiencies

License #: 212

Compliance Determination # 55132

Plan of Correction

HORIZON HOUSE

Completion Date

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Licensee: HORIZON HOUSE

03/03/2025

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, HORIZON HOUSE is or will be in compliance with this law and / or regulation on (Date) 04/17/2025.

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

Lauri Wayfield-Lynn, NHA, OTRIL, COO
Administrator (or Representative)

03/06/2025
Date