



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

Cogir Management USA Inc  
Cogir Queen Anne  
805 4th Ave N  
Seattle, WA 98109

RE: Cogir Queen Anne License # 2473

Dear Administrator:

This letter addresses Compliance Determination(s) 49851 (Completion Date 11/05/2024) and 47963 (Completion Date 10/14/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 11/05/2024 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-2450-2-f-ii

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  
Region 2, Unit J  
Residential Care Services



## Residential Care Services Investigation Summary Report

**Provider/Facility:** Cogir Queen Anne

**Provider Type:** Assisted Living Facility

**License/Cert.#:** 2473

**Compliance Determination #:** 47963

**Intake ID:** 149002

**Investigator:** Cathy Prentice

**Region/Unit #:** RCS Region 2 / Unit J

**Investigation Date(s):** 09/30/2024 through 10/14/2024

**Complainant Contact Date(s):** 09/27/2024, 10/14/2024

### Allegation(s):

1. It was stated the ALF took residents on an overnight trip with no med tech or care provider. 2. No one was CPR certified on the trip. 3. A named resident possibly went on the trip without medications. 4. A nurse did not know a named resident was gone on the trip.

### Investigation Methods:

**Sample:**

Total residents: 85  
Resident sample size: 3  
Closed records sample size: 0

**Observations:**

Observed ALF residents, delivery of care and services; staff interactions with residents; residents' appearance; environment.

**Interviews:**

Interviewed ALF residents, staff, administration.

**Record Reviews:**

Resident care records, Assessment, Negotiated Service Agreement (NSA), investigations, grievances, facility policies, other pertinent records.

### Investigation Summary:

Observation, interview and record review showed, 1. The ALF Activity Dept. took eight residents on an overnight trip including two ALF residents on 09/17/2024-09/19/2024 accompanied by two Activity Dept staff and no nurse or caregiver. Six of the residents were independent living and two were ALF residents who were independent with ADL's except medication management. 2. The facility failed to ensure the staff on the outing off premises with ALF residents had CPR and First Aide training/records. See Statement of Deficiencies dated 10/14/2024. 3. The two ALF residents took packaged marked medications on the trip with them per facility policy. No failed practice identified. 4. One of the ALF residents did not sign out for the trip at the front desk and a new nurse was unsure at first where the resident was until it was confirmed she went on the trip. No failed practice identified.

### 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 #: 2473                    | Compliance Determination # 47963 |
| Plan of Correction        | Cogir Queen Anne                   | Completion Date                  |
| Page 1 of 3               | Licensee: Cogir Management USA Inc | 10/14/2024                       |

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 09/30/2024 and 09/30/2024 of:

Cogir Queen Anne  
805 4th Ave N  
Seattle, WA 98109

This document references the following complaint number(s): 147940, 149002

The following sample was selected for review during the unannounced on-site visit: 3 of 85 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Cathy Prentice, 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

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.

  
Residential Care Services

10/16/2024  
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.

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

Statement of Deficiencies

License #: 2473

Compliance Determination # 47963

Plan of Correction

Cogir Queen Anne

Completion Date

Page 2 of 3

Licensee: Cogir Management USA Inc

10/14/2024



Administrator (or Representative)

10/22/24  
Date**WAC 388-78A-2450 Staff.**

(2) The assisted living facility must:

(f) Ensure at least one caregiver, who is eighteen years of age or older and has current cardiopulmonary resuscitation and first-aid cards, is present and available to assist residents at all times:

(ii) During assisted living facility activities off of the assisted living facility premises.

**This requirement was not met as evidenced by:**

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure a caregiver with current cardiopulmonary resuscitation (CPR) and first-aid training was present when 2 of 2 residents (Resident 1 and 2) participated in a 48 hour ALF arranged outing. This failure placed residents at risk during life threatening emergencies.

**Findings included...**

Record review of a Face Sheet showed the ALF admitted Resident 1 on [REDACTED]/2017. Review of a Negotiated Service Agreement (NSA), dated 06/01/2024, showed Resident 1 required ALF staff assistance with medication management.

Record review of a Face Sheet showed the ALF admitted Resident 2 on [REDACTED]/2020. Review of a NSA, dated 04/06/2024, showed Resident 1 required ALF staff assistance with medication management.

In an interview, on 09/30/2024 at 11:15 AM, Staff A (Activity Director) stated she and Staff B (Activity Assistant) took a trip from 09/17/2024 to 09/19/2024 with Resident 1 and 2, for two overnights with rented lodging. Staff A stated she was not a caregiver and did not have a CPR or first-aid training.

In an interview, on 09/30/2024 at 2:30 PM, Staff B confirmed she was also on the trip with Resident 1 and 2 from 09/17/2024 to 09/19/2024. Staff B stated she was not a caregiver and did not have a CPR or first-aid training.

Review of the Washington State Provider Credential Search, on 10/09/2024, showed neither Staff A or Staff B had caregiver credentials.

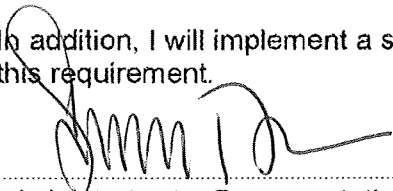
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| Statement of Deficiencies | License #: 2473                    | Compliance Determination # 47963 |
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| Page 3 of 3               | Licensee: Cogir Management USA Inc | 10/14/2024                       |

Review of an email, dated 09/30/2024, from Staff C (Business Office Manager and Assistant Administrator) showed the ALF had no record of CPR or first-aid certifications for Staff A or Staff B on file.

**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, Cogir Queen Anne is or will be in compliance with this law and / or regulation on (Date) NOVEMBER 1, 2024

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

  
Administrator (or Representative)

10/22/24  
Date

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