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 of Northgate Memory Care
11039 17th Ave NE
Seattle, WA 98125

RE: Cogir of Northgate Memory Care License # 2622

Dear Administrator:

This letter addresses Compliance Determination(s) 38423 (Completion Date 03/19/2024) and 35004 (Completion Date 01/18/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 03/19/2024 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-2730-1, WAC 388-78A-2730-1-a, WAC 388-78A-2730-1-b, WAC 388-78A-2730-1-c

The Department staff who did the on-site verification:
Hayley Pinkham, ALF Licensor

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: Cogir of Northgate Memory Care
Provider Type: Assisted Living Facility
License/Cert.#: 2622
Intake ID: 113202
Compliance Determination #: 35004
Region/Unit #: RCS Region 2 / Unit J
Investigator: Hayley Pinkham
Investigation Date(s): 01/10/2024 through 01/18/2024
Complainant Contact Date(s):

Allegation(s):
The Assisted Living Facility (ALF) has positive COVID cases.

Investigation Methods:

Sample:	Total residents: 38 Resident sample size: 2 Closed records sample size:
Observations:	Residents Activities Dining Resident care equipment Staff to resident interactions Resident to resident interactions
Interviews:	Nursing staff Residents Family members
Record Reviews:	Medical records Facility policies Staff patterns

Investigation Summary:
Observation, interview, and record review showed the ALF followed Covid guidelines for testing, reporting, and screening for residents and staff. The ALF notified the department and followed DOH guidance for identifying residents for possible need of quarantine. The ALF did not follow their Respiratory Protection Program, not all staff had been fit-tested. Deficient practice identified.

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 #: 2622	Compliance Determination # 35004
Plan of Correction	Cogir of Northgate Memory Care	Completion Date
Page 1 of 3	Licensee: Cogir Management USA Inc	01/18/2024

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 01/10/2024 and 01/10/2024 of:

Cogir of Northgate Memory Care
11039 17th Ave NE
Seattle, WA 98125

This document references the following complaint number(s): 112515, 113202

The following sample was selected for review during the unannounced on-site visit: 2 of 38 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

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.

Jamie Singer — Residential Care Services

1/22/2024 — 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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Administrator (or Representative) 1/24/24 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

(c) The care and services provided to the assisted living facility residents.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living facility (ALF) failed to follow a Respiratory Protection Program (RPP) by ensuring 3 of 3 sampled staff (Staff B, C, and D) met the respirator mask fit-testing requirements. This failure placed 38 residents at risk for exposure to COVID -19 (is an infectious disease by a virus causing respiratory illness with symptoms including cough, fever, new or worsening malaise, headache, or new dizziness, nausea, vomiting, diarrhea, loss of taste or smell, and in severe cases difficulty breathing that could result in severe impairment or death).

Findings included...

NOTE: Washington Administrative Code (WAC) 296-842-12005 stated all long term-care facilities were required to develop and maintain an RPP.

NOTE: Review of 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 Department of Health as a "federal and state OSHA (Occupational Safety and Health Administration) requirement to protect workers from exposure to respiratory hazards." The ALF were required to provide initial and annual fit-tests for each Health Care Worker (HCW) with the same model, style, and size respirator that the HCW would be required to wear for protection against COVID-19 and airborne hazards, and annually thereafter. The ALF were required to provide fit-tested respirators, such as N95, to all HCWs with the potential to have contact with residents with known or suspected COVID-19.

Record review of the ALF's policy, "Respiratory Protection Protocol", dated September 2022, showed the Respiratory Program Administrator was Staff A (Health and Wellness Director). The policy showed the Respiratory Program Administrator's duties were to oversee the development of the respiratory program and make sure it was carried out at the workplace. The policy showed the Respiratory Program Administrator would evaluate the program

Administrator (or Representative) Date

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regularly to make sure procedures were followed, respirator use was monitored, and respirators continued to provide adequate protection.

Record review of the ALF's RPP documents showed Staff B (Caregiver) had a fit test completed on 09/20/2022. Staff B had no record of another fit test completed within the annual requirement. Record review showed Staff C (Caregiver) and Staff D (Caregiver) had no record of completed fit testing.

In interview, on 01/10/2024 at 12:27 PM, Staff A stated she was responsible for scheduling fit testing for the HCWs. Staff A confirmed that Staff B, C and D had either expired or not completed fit testing for a respirator mask. Staff A confirmed HCW's without current respirator mask fit testing had provided care during an ALF Covid outbreak. Staff A stated, "I don't have a good answer for why it didn't get done."

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 of Northgate Memory Care is or will be in compliance with this law and / or regulation on (Date) 2/2/24.

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

Administrator (or Representative) — Date: 1/24/24

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