



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

08/26/2025

Cogir Management USA Inc
Cogir of Kirkland
6505 Lakeview Dr
Kirkland, WA 98033

RE: Cogir of Kirkland # 2686

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 64707 (Completion Date 08/26/2025) and 61702 (Completion Date 06/25/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 08/26/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 388-78A-2489 Tuberculosis Test records. The assisted living facility must:

- (1) Keep the records of tuberculin test results, reports of X-ray findings, and any physician or public health provider orders in the assisted living facility;
- (2) Make the records readily available to the appropriate health provider and licensing agency,

WAC 388-78A-2483 Tuberculosis One test. The assisted living facility is only required to have a staff person take one test if the staff person has any of the following:

- (1) A documented history of a negative result from a previous two step skin test done no more than one to three weeks apart; or

The Department staff who did the On Site verification:

Thomas Forkgen, ALF Licenser
Michelle Yip, ALF Licenser

If you have any questions, please contact me at (253)234-6020.

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

Sincerely,

Laurie Anderson

Laurie Anderson, Community Field Manager
Region 2, Unit D
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: Cogir of Kirkland

Provider Type: Assisted Living Facility

License/Cert.#: 2686

Compliance Determination #: 61702

Intake ID: 184470

Investigator: Thomas Forkgen

Region/Unit #: RCS Region 2 / Unit D

Investigation Date(s): 06/24/2025 through 06/25/2025

Complainant Contact Date(s):

Allegation(s):

Facility did not maintain staff Tuberculosis test records on-site. Staff who had a documented history of a negative two step completed without the facility administering a one-step TB as required.

Investigation Methods:

Sample:	Total residents: 32 Resident sample size: 0 Closed records sample size: 0
Observations:	Observed business office manager working on-site without having received a one-step TB as required 46 days after hire.
Interviews:	Director of Health Services, Executive Director, Business Office Manager.
Record Reviews:	Reviewed 15 staff files TB records

Investigation Summary:

Facility failed to maintain Staff TB records on-site as required. Facility failed to administer a one-step TB test for 1 of 14 sampled staff within three days of hire. Citations issued.

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 #: 2686	Compliance Determination # 61702
Plan of Correction	Cogir of Kirkland	Completion Date
Page 1 of 4	Licensee: Cogir Management USA Inc	06/25/2025

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 06/24/2025 and 06/25/2025 of:

Cogir of Kirkland
6505 Lakeview Dr
Kirkland, WA 98033

This document references the following complaint number(s): 184470

The following sample was selected for review during the unannounced on-site visit: 0 of 32 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Thomas Forkgen, ALF Licenser

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit D
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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

Statement of Deficiencies	License #: 2686	Compliance Determination # 61702
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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.

Laurie Anderson

Residential Care Services

06/26/2025

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.

Lima White
Administrator (or Representative)

6/26/2025
Date

WAC 388-78A-2489 Tuberculosis Test records. The assisted living facility must:

- (1) Keep the records of tuberculin test results, reports of X-ray findings, and any physician or public health provider orders in the assisted living facility;
- (2) Make the records readily available to the appropriate health provider and licensing agency,

This requirement was not met as evidenced by:

Based on interview and record review the facility failed to maintain 14 of 14 sampled staff (Staff B, Staff C, Staff E, Staff F, Staff H, Staff I, Staff J, Staff K, Staff L, Staff M, Staff N, Staff O, Staff P, and Staff Q) tuberculin test results on-site at the facility. This failure placed all 32 residents at risk of potential exposure to tuberculosis (TB), an infectious disease, from staff with unknown test results.

Findings included...

Review of the facility's document titled "Tuberculosis: Care Staff", dated 12/01/2023, showed that the facility followed the state regulations to keep the staff records of TB test results and reports of X-ray findings in the facility.

Review of the facility employee records showed that there were no TB tests and X-Ray results available on-site at the facility.

During an interview on 06/24/2025 at 11:57 AM, Staff D, Health and Wellness Director, stated that Staff F, Medication Technician, and Staff H, Medication Technician, had chest X-rays done in 2024. Staff D stated that they needed to get copies of the chest X-ray

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.

Laurie Anderson

Residential Care Services

06/26/2025

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.

Administrator (or Representative)

Date

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Review of the facility employee records showed that there were no TB tests and X-Ray results available on-site at the facility.

During an interview on 06/24/2025 at 11:57 AM, Staff D, Health and Wellness Director, stated that Staff F, Medication Technician, and Staff H, Medication Technician, had chest X-rays done in 2024. Staff D stated that they needed to get copies of the chest X-ray

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reports from the outside contracted health care provider.

During an interview on 06/24/2025 at 1:10 AM, Staff A, Executive Director, stated that the facility did not maintain any of the staff TB records on-site. Staff A stated that the facility needed to contact the outside contracted health care provider and request copies of the sampled staff's TB records. Staff A stated that they were unaware of the requirement to maintain staff TB records onsite.

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 Kirkland is or will be in compliance with this law and / or regulation on (Date) 8/10/25 . 8/9/25 mm

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

Administrator (or Representative)

Luna White

Date 6/24/25

WAC 388-78A-2483 Tuberculosis One test. The assisted living facility is only required to have a staff person take one test if the staff person has any of the following:

(1) A documented history of a negative result from a previous two step skin test done no more than one to three weeks apart; or

This requirement was not met as evidenced by:

Based on observation, interview and record review, the facility failed to complete 1 of 1 staff's (Staff B) one test for Tuberculosis (TB), as required. This failure placed all 32 residents at risk of potential exposure to tuberculosis, an infectious disease.

Finding included...

NOTE: WAC 388-78A-2480 states the assisted living facility must develop and implement a system to ensure each staff person is screened for tuberculosis within three days of employment.

Review of the facility's document titled "Tuberculosis: Care Staff", dated 12/01/2023, showed that the facility followed the state regulations to screen and test staff for TB within three days of employment.

reports from the outside contracted health care provider.

During an interview on 06/24/2025 at 1:10 AM, Staff A, Executive Director, stated that the facility did not maintain any of the staff TB records on-site. Staff A stated that the facility needed to contact the outside contracted health care provider and request copies of the sampled staff's TB records. Staff A stated that they were unaware of the requirement to maintain staff TB records onsite.

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Administrator (or Representative)

Date

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STAFF B

Observation on 06/24/2025 at 11:57 AM, showed that during a meeting with the Department Licensor, Staff A, Executive Director, and Staff D, Health Services Director and Staff B, Business Office Manager, were in attendance.

Review of the facility's Employee Roster showed the facility hired Staff B on 05/09/2025. Review of Staff B's employee records showed documentation of a negative two-step TB test completed in February 2024. The records showed a one-step TB test was given on 01/31/2024 and read on 02/03/2024 with a negative result. The records showed a two-step TB test was given on 02/15/2024 and read on 02/18/2024 with a negative result. The records showed that as of 06/24/2025, 46 days after hire, there was no documentation that a one-step TB test was administered, as required. There was no documentation that the facility screened Staff B for TB with a one-step test, as required.

During an interview on 06/24/2025 at 1:10 PM, Staff A stated that Staff B was unaware a one-step TB test was required within three days of employment. Staff A stated that Staff B thought that since they completed a negative two-step TB test in February 2024 with a previous employer, they were not required to test again. Staff A stated that the facility did not screen or test Staff B for TB within three days of hire.

Plan/Attestation Statement

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

Uma White
Administrator (or Representative)

6/26/2025
Date

STAFF B

Observation on 06/24/2025 at 11:57 AM, showed that during a meeting with the Department Licensors, Staff A, Executive Director, and Staff D, Health Services Director and Staff B, Business Office Manager, were in attendance.

Review of the facility's Employee Roster showed the facility hired Staff B on 05/09/2025. Review of Staff B's employee records showed documentation of a negative two-step TB test completed in February 2024. The records showed a one-step TB test was given on 01/31/2024 and read on 02/03/2024 with a negative result. The records showed a two-step TB test was given on 02/15/2024 and read on 02/18/2024 with a negative result. The records showed that as of 06/24/2025, 46 days after hire, there was no documentation that a one-step TB test was administered, as required. There was no documentation that the facility screened Staff B for TB with a one-step test, as required.

During an interview on 06/24/2025 at 1:10 PM, Staff A stated that Staff B was unaware a one-step TB test was required within three days of employment. Staff A stated that Staff B thought that since they completed a negative two-step TB test in February 2024 with a previous employer, they were not required to test again. Staff A stated that the facility did not screen or test Staff B for TB within three days of hire.

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