



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

Sound
Keystone
3515 Woodland Park Ave N
Seattle, WA 98103

RE: Keystone License # 2599

Dear Administrator:

This letter addresses Compliance Determination(s) 42913 (Completion Date 06/26/2024) and 42141 (Completion Date 06/13/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 06/26/2024 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-2483-1

The Department staff who did the off-site verification:
Faith Le, NCI
Erin Steinbrenner, Nursing Consultant Institutional

If you have any questions, please contact me at (253)312-1446.

Sincerely,



Jamie Singer, Field Manager
Region 2, Unit J
Residential Care Services



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Statement of Deficiencies	License #: 2599	Compliance Determination # 42141
Plan of Correction	Keystone	Completion Date
Page 1 of 2	Licensee: Sound	06/13/2024

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 the unannounced on-site full inspection on 06/10/2024 and 06/12/2024 of:

Keystone
3515 Woodland Park Ave N
Seattle, WA 98103

The following sample was selected for review during the unannounced on-site visit: 10 of 63 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Faith Le, NCI
Erin Steinbrenner, Nursing Consultant Institutional

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

6/13/2024

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.

Statement of Deficiencies	License #: 2599	Compliance Determination # 42141
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 Administrator (or Representative)

6/18/2024
 Date

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 interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 1 staff member (Staff C) completed the required one step tuberculin skin test (TST). This placed 63 residents at risk of exposure to a communicable disease.

Findings included...

Record review showed the ALF hired Staff C (Residential Case Manager) on 02/12/2024, Record review showed Staff C had documentation history of a negative result from a previous two step TST completed on 11/03/2022 and 11/21/2022, prior to their employment. Staff C did not have a one-step TST within three days of hire date.

In interview, on 06/12/2024 at 11:35 AM, Staff F (Administrator) stated she did not have any additional TB records for Staff C.

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, Keystone is or will be in compliance with this law and / or regulation on (Date) 6/17/2024 6/24/2024 Erin Steinbrenner confirmed ammended POC date with provider on 6/20/2024.	
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.	
 Administrator (or Representative)	<u>6/18/2024</u> Date