STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	505319	A. Building B. Wing	05/21/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Alderwood Post Acute & Rehabilitation	3701 188th Street Southwest Lynnwood, WA 98037

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide and implement an infection prevention and control program. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure that staff followed transmission-based precautions (TBP) for 1 of 2 units (Second floor) reviewed for infection control procedures. This failure placed other residents and staff at risk for transmission of infection.Findings included.According to the Centers for Disease Control website (cdc.gov/infection-control/hcp/basics/transmission-based-precautions) when a resident had Contact Precautions, staff: Clean hands before entering and when leaving room. Wear a gown and gloves for all interactions that may involve contact with the patient or their environment. Limit resident movement outside of the resident's room to medical-necessary purposes.Review of a facility policy titled, Transmission Based Precautions, review date 10/24/2022, documented that all staff and visitors would wear gloves and gowns when entering the room for all interactions that may involve contact with the resident or resident's environment. Review of Resident 1's order summary report documented an order for contact precautions initiated on 02/24/2026.Review of Resident 1's care plan showed a focus area for contact precautions related to wounds, initiated on 02/24/2026.During an observation on 05/20/2026 at 9:25 AM, a Contact Precaution sign was at the doorway of Resident 1's room (room [ROOM NUMBER]). The sign documented: Contact Precautions. Everyone must clean their hands before entering and when leaving the room. The sign also showed providers and staff must put on gloves and a gown before entering room. There was a plastic three drawer rolling cart outside the door that contained gloves and disposable gowns.During an observation of meal pass on 05/20/2026 at 12:13 PM, Staff B, Certified Nurses Aide (CNA), brought Resident 1 their lunch tray. Staff B did not put on gloves or a gown before entering the room. Staff B was observed to touch Resident 1's bedside table and place items on Resident 1's bed, brushing their pants up against the edge of the mattress.During an interview on 05/20/2026 at 12:15 PM, Staff B reported they did not use a gown or gloves because they were just the delivering the meal tray. Staff B reviewed the sign at the doorway and stated they should have put on gloves and a gown before entering the room.During a continuous observations on 05/20/2026 at 3:01 PM- 3:12 PM, Resident 1 was sitting in a wheelchair in the hallway near the nurse's station. Staff C, Licensed Practical Nurse, spoke briefly with Resident 1 and then pushed them into their room. Staff C did not put on a gown or gloves prior to assisting Resident 1. After entering the room, Staff C was observed to push on top of the bed with both hands, kneel on the floor to peer under the resident's bed, and then removed the bedding from the bed, exposing an air mattress. Staff C lifted the air mattress from the bed frame and attempted to disconnect the lower section. At 3:04 PM, Staff D, CNA, entered Resident 1's room without applying a gown or gloves. Staff D put their forearm and hand on Resident 1's shoulder as they talked with them. Staff D also pushed on the air mattress with both hands and then left the room. Resident 1 spoke to Staff C. Staff C exited the room without performing hand hygiene, walked to the medication cart and took a spoon out of the container attached to the left side of the cart, and returned to the room and provided to Resident 1.During an interview on 05/20/2026 at 3:07 PM, Staff D stated they had not worn a gown or glove as they were not doing personal care. Staff D reviewed the sign and reported the sign showed they should have worn a gown and gloves to go into the room and that they did not (continued on next page)

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	realize that sign was different from the other signs on the unit [Enhanced Barrier Precaution (EBP) sign].During an interview on 05/20/2026 at 3:12 PM, Staff C reported that Resident 1 can self-propel their wheelchair and came out of their room on their own. Staff C reviewed the sign at the doorway to Resident 1's room and reported that sign was incorrect and they should be on EBP and not Contact Precautions. Staff C was asked about performing hand hygiene when exiting Resident 1's room and before touching the medication cart, but they did not respond.During an observation on 05/21/2026 at 9:40 AM, Resident 1 was observed sitting in their wheelchair near the elevators on the first floor.During an interview on 05/21/2026 at 12:25 PM, Staff A, Director of Nursing, stated residents on contact precautions should remain in their room. Staff A stated staff should read the TBP sign before entering the room and follow the directions. Specifically for contact precautions, staff need to do hand hygiene and apply a gown and gloves before entering room. Staff A stated staff need to remove the gown and gloves before exiting the room and then do hand hygiene when leaving. Refer to WAC 388-97-1320 (1) (a)(c)