



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

Aegis Senior Communities LLC  
Aegis Living at Ravenna  
8511 15th Ave NE  
Seattle, WA 98115

RE: Aegis Living at Ravenna License # 2455

Dear Administrator:

This letter addresses Compliance Determination(s) 56967 (Completion Date 03/31/2025) and 53198 (Completion Date 02/04/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 03/31/2025 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-2150-1, WAC 388-78A-2150-2, WAC 388-78A-2305-1

The Department staff who did the on-site verification:

Faith Le, NCI  
Judith Mellon, RN, Licensors  
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

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



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

Statement of Deficiencies	License #: 2455	Compliance Determination # 53198
Plan of Correction	Aegis Living at Ravenna	Completion Date
Page 1 of 5	Licensee: Aegis Senior Communities LLC	02/04/2025

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 the unannounced on-site full inspection on 01/28/2025 and 01/30/2025 of:

Aegis Living at Ravenna  
8511 15th Ave NE  
Seattle, WA 98115

The following sample was selected for review during the unannounced on-site visit: 9 of 67 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Faith Le, NCI  
Judith Mellon, RN, Licenser  
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

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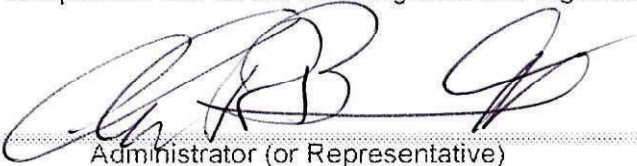
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As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

  
Residential Care Services

2/6/2025  
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)

2/19/2025  
Date

**WAC 388-78A-2150 Signing negotiated service agreement. The assisted living facility must ensure that the negotiated service agreement is agreed to and signed at least annually by:**

- (1) The resident, or the resident's representative if the resident has one and is unable to sign or chooses not to sign;
- (2) A representative of the assisted living facility duly authorized by the assisted living facility to sign on its behalf; and

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

Based on interviews and record reviews the Assisted Living Facility (ALF) failed to ensure a resident or their representative and an authorized person from the ALF signed the Negotiated Service Agreement (NSA) for 4 of 9 sampled residents (Resident 3, 4, 5 and 8). This failure placed Residents 3, 4, 5 and 8 at risk for not receiving care and services as agreed upon.

Findings included...

Record review of the ALF's policy and procedure titled Assessment and Service Planning Meeting Process dated 09/30/2022 showed in section 7 - Service Agreement Signatures Obtained stated "All service agreements [also known as NSA] should have a resident or responsible party's signature. In the event the resident or responsible party is delayed in signing, clear documentation of all communication attempts should be documented by email or in the resident chart notes." The procedure showed "the Health Service Director should also sign each service agreement."

Resident 3



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Resident 3 was admitted to the ALF on [REDACTED]/2024 with multiple medical diagnoses including [REDACTED] ( [REDACTED] ) and [REDACTED].

Record review of Resident 3's NSA, dated 12/04/2024, showed there were no signatures from Resident 3 or their representative.

In interview, on 01/30/2025 at 9:20 AM, Staff G (Health Services Director) confirmed the ALF did not have a signed service plan for Resident 3.

#### Resident 4

Resident 4 was admitted to the ALF on [REDACTED]/2024 with multiple medical diagnoses including [REDACTED] ( [REDACTED] ) and a [REDACTED].

Record review of an email dated 11/27/2024 and sent to Resident 4's Representative showed Resident 4's NSA was updated with an increase of care for Hospice Services and vital sign monitoring. The email requested an electronic signature if there were no concerns or questions and if there were any concerns a care conference to review care could be held. Record review showed there was no response from Resident 4's representative and no follow-up documentation from the ALF.

Record review of Resident 4's most recent NSA, dated 11/21/2024, showed there were no signatures from Resident 4, their representative or from a representative of the ALF to show care and services were agreed upon for Resident 4.

#### Resident 5

Resident 5 was admitted to the ALF on [REDACTED]/2023 with multiple medical diagnoses including [REDACTED] and [REDACTED] ( [REDACTED] ).

Record review of Resident 5's most recent NSA, dated 10/10/2024, showed there were no signatures from Resident 5, their representative or from a representative of the ALF to show care and services for Resident 5 were mutually agreed upon.

#### Resident 8

Resident 8 was admitted to the ALF on [REDACTED]/2024 with multiple medical diagnoses

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including [REDACTED] [REDACTED] ).

Record review of Resident 8's NSA, dated 01/02/2025, showed there were no signatures from Resident 8 or their representative.

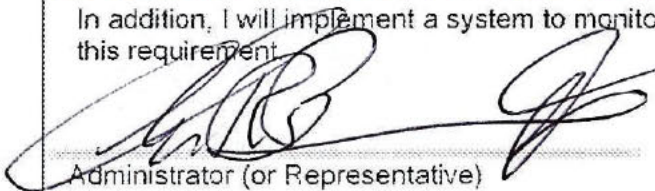
In an interview, on 01/30/2025 at 9:41 AM, Staff G stated, "there are no signatures for the NSA Residents 4 or 5." Staff G stated that when a Resident's NSA is updated, an email is sent to the Resident's representative to show any changes in care or services. Staff G stated, "Resident Representatives do not always respond to the emails." No documentation was available to show any follow-up on obtaining signatures to show care and services were mutually agreed upon for Resident 3, 4, 5, and 8.

#### 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, Aegis Living at Ravenna is or will be in compliance with this law and / or regulation on (Date) 3/25/2025

SB confirmed ammended POC date with provider on 2/20/2025.

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

  
Administrator (or Representative)

2/19/2025  
Date

3/21/2025

#### WAC 388-78A-2305 Food sanitation. The assisted living facility must:

(1) Manage food, and maintain any on-site food service facilities in compliance with chapter 246-215 WAC, Food service;

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

Based on observation and interviews, the Assisted Living Facility (ALF) failed to ensure cold food serving temperatures were maintained at 41 degrees Fahrenheit (F) or below. This failure placed residents at risk for food-borne illness.

Findings included...

NOTE Washington Administrative Code 246-215-03235 Specifications for receiving—Temperature (Food and Drug Administration Food Code 3-202.11). (1) Except as specified in subsections (2) through (4) of this section, refrigerated, time/temperature control for safety food must be at a temperature of 41°F (5°C) or below when received.



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Review of the undated Resident Characteristic Roster showed the facility provided care and services including meals to 68 memory care residents, 13 of the residents resided on the Memory Care Unit.

Observation during the food service and kitchen tour with staff H (Culinary Director), on 01/28/2025 at 1:40 PM, showed a refrigerated sandwich/salad prep table (RST). Observation showed the temperature inside the RST was 48 degrees F. Further observation showed Staff H taking the temperature of ready to eat food stored inside and on top of the RST. The temperature of the coleslaw was 46.6 degrees F; cooked chicken was 46.5 degrees F; sliced red onion was 50 degrees F; and tartar sauce was 46.8 degrees F.

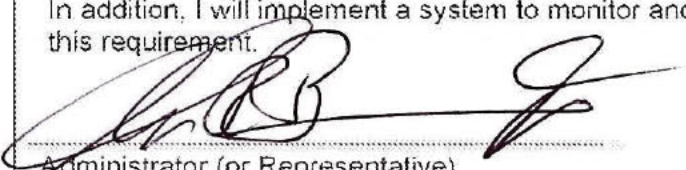
In interview, on 01/28/2025 at 1:48 PM, Staff H stated the RST was due for maintenance, and the refrigerated ready to eat food should be kept no higher than 40 degrees F.

#### 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, Aegis Living at Ravenna is or will be in compliance with this law and / or regulation on (Date) 3/21/2025

SB confirmed ammended POC date with provider on 2/20/2025.

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

  
Administrator (or Representative)

2/19/2025  
Date