STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Dignity Senior Care LLC

Dignity Senior Care LLC
4922 181st Pl SW
Lynnwood, WA 98037

RE: Dignity Senior Care LLC License # 757055

Dear Provider:

This letter addresses Compliance Determination(s) 79280 (Completion Date 06/18/2026) and 78320 (Completion Date 06/03/2026).

The Department completed a follow-up inspection of your Adult Family Home on 06/18/2026 and found that you have corrected the violations listed in the Full report dated 06/03/2026. Your home is back in compliance as of 06/01/2026 with the cited requirements of the Washington Administrative Code or the Revised Code of Washington or both.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-76-10430-1, WAC 388-76-10750-7

The Department staff who did the on-site verification:
Hang Lu, Licensor

If you have any questions, please contact me at (206)914-5042.

Sincerely,

Renee Bourque

Renee Bourque, Field Manager
Region 2, Unit I
Residential Care Services

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

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DEPARTMENT OF SOCIAL AND HEALTH SERVICES

HOME AND COMMUNITY LIVING ADMINISTRATION

20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Adult Family Home license.

The department completed data collection for the unannounced on-site full inspection on 05/29/2026 of:

Dignity Senior Care LLC
4922 181st Pl SW
Lynnwood, WA 98037

The following sample was selected for review during the unannounced on-site visit: 1 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Hang Lu, Licensor

From:
DSHS, Home and Community Living Administration
Residential Care Services, Region 2 , Unit I
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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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.

Renee' Bourque
Residential Care Services

06/04/2026
Date

I understand that to maintain an Adult Family Home license, I must be in compliance with all the licensing laws and regulations at all times.

Provider (or Representative)

6/11/26
Date

WAC 388-76-10430 Medication system.

(1) If the adult family home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have a system in place to ensure the services provided met the medication needs for 1 of 1 sampled resident (Resident 1) by monitoring the blood pressure (BP) prior to giving a medication. This failure placed Resident 1 at risk of medical complications.

Findings included...

Review of Resident 1's record showed the AFH admitted Resident 1 on [redacted]/2024 with medically disabling diagnoses. Record review showed Resident 1 was on multiple prescribed medications.

Review of Resident 1's May 2026 Medication Log (ML) showed two medication entries for Hydralazine (for BP). The first entry read, "Hydralazine Tablet 100 mg (milligrams): Take 1/2 tablet (50 mg) by mouth four times daily. Total daily dose = 300 mg. Hold for systolic BP (the top number in the BP reading) less than 110 mmHg (millimeters of mercury)." The second entry read, "Hydralazine Tablet 25 mg: Take 1 tablet (25 mg) by mouth four times daily. Total daily dose = 300 mg. Hold for systolic BP less than 110 mmHg."

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Review of the Resident 1's May 2026 ML showed Hydralazine was given at 8 AM, 12 PM, 5 PM, and 8 PM.

Observation and interview, on 05/29/2026 at 3:51 PM, showed Staff C, Caregiver, presenting to the Regulator their documentation of Resident 1's BP at 8 AM, 2 PM, 5 PM, and 8 PM. (Note: Resident 1 required BP or heart rate (HR) check at 2 PM before taking Clonidine [for attention] and Isosorbide [for BP]). Staff C did not have documentation to show they checked Resident 1's BP prior to giving the Noon dose of Hydralazine. Staff C did not explain why they did not monitor Resident 1's BP at 12 PM each day.

In an interview, on 05/29/2026 at 3: 55 PM, Staff D, Back-up Person, stated that they would create a document on their computer right away for staff to document Resident 1's BP at 8 AM, 12 PM, 2 PM, 5 PM, and 8 PM.

Review of documents, received by the Department on 06/01/2026, showed the AFH sent a copy of Resident 1's Vital Sign Log for May (to show they had started to monitor Resident 1's BP and HR five times a day) and June (2026).

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, Dignity Senior Care LLC is or will be in compliance with this law and / or regulation on (Date) 6/1/26 .

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

Provider (or Representative) — Date: 6/11/26

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(7) Keep all toxic substances and hazardous materials in locked storage and in their original containers;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure all cleaning chemicals were kept in locked storage. This failure placed 3 of 5 residents (Residents 3, 4, and 5) at risk of harm from exposure to toxic and hazardous materials.

Findings included...

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In an interview, on 05/29/2026 at 10:45 AM, Staff C, Caregiver, reported that Residents 3, 4, and 5 were able to get around using their walkers.

Observation and interview, on 05/29/2026 at 4:49 PM, showed the AFH kept their cleaning chemicals in the lower cabinet (in the kitchen area) that had a white plastic child lock. The Regulator was able to slide the button (on the child lock) to the left to unlock and open the cabinet. Staff D, Back-up Person, stated that they would purchase a real lock right away.

Review of document received by the Department on 06/01/2026 showed the AFH sent a picture of a key lock on the kitchen lower cabinet.

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, Dignity Senior Care LLC is or will be in compliance with this law and / or regulation on (Date) 5/30/26 .

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

Provider (or Representative) — Date: 6/11/26

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