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

Aegis Senior Communities LLC
AEGIS OF MADISON

,

RE: AEGIS OF MADISON License # 2241

Dear Administrator:

This letter addresses Compliance Determination(s) 74501 (Completion Date 03/18/2026) and 71840 (Completion Date 01/28/2026).

The Department completed a follow-up inspection of your Assisted Living Facility on 03/18/2026 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-2305-2

The Department staff who did the on-site verification:
Cathy Prentice, Complaint Investigator

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

Sincerely,

Jamie Singer

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

Residential Care Services
Investigation Summary Report

Provider/Facility: AEGIS OF MADISON
Provider Type: Assisted Living Facility
License/Cert.#: 2241
Compliance Determination #: 71840
Intake ID: 208452
Investigator: Cathy Prentice
Region/Unit #: RCS Region 2 / Unit J
Investigation Date(s): 01/23/2026 through 01/28/2026
Complainant Contact Date(s): 01/20/2026, 01/21/2026, 01/22/2026, 01/28/2026

Allegation(s):

1. The facility pressured kitchen staff to work when sick with a communicable illness. 2. The facility does not enforce mask policy.
3. Kitchen staff take towels, knives and equipment from one station to another without cleaning or sanitizing.
4. There is no covering the pans on the cold top table. The covers are stored on the floor.
5. Sick people are using vaporizers in the kitchen next to uncovered food in the doorway.
6. There are condensation issues from hot and cold areas where food is stored and a cleaning schedule was not implemented when suggested.
7. People are operating sanitation equipment without training.
8. A staff was infected with RSV due to the kitchen staff being ill when working.
9. There may be concerns regarding air vents, thermostats, thermometers, storage of walnuts over uncovered salad prep.

Investigation Methods:

Sample:	Total residents: 77 Resident sample size: 3 Closed records sample size: 0
Observations:	Observed ALF residents, delivery of care and services; staff interactions with residents; residents' appearance; environment; Infection Control practices; kitchen and food storage.
Interviews:	Interviewed ALF residents, staff, administration.
Record Reviews:	Reviewed grievances, facility policies, resident records, staff records, facility policies, other pertinent records.

Investigation Summary:

Based on observation, interview and record review:
1. The facility had a staff illness and infection control policy as required. The facility stated ill staff are not allowed to work. There were no ill staff observed at work. There was no illness outbreak at the facility in December or January. No failed

practice identified.
2. The facility does not have a mandatory mask policy. No failed practice identified.
3. There was no cross contamination observed in the kitchen during lunch service. The staff stated they do not use utensils, towels or equipment from one area to another. No failed practice identified.
4. The cold food station had a cover. The facility stated the storage for the cover is on a shelf. No failed practice identified.
5. there were no ill staff observed in the facility. The facility had a policy for staff not to work when sick. No failed practice identified.
6. The facility had clean food storge for cold food in refrigerators and freezers and dry food storage that were separate and clean as required. No failed practice identified.
7. The facility had sanitation buckets and requirement sanitization as required. The staff interviewed knew how to sanitize per the facility procedure. The facility failed to have food cards for 3 of 6 sampled staff. See Statement of deficiency dated 01/28/2026.
8. There was no noted outbreak of staff illness in the facility and the facility stated they do not allow sick staff to work. No failed practice identified.
9. The kitchen had working ventilation and thermostats. The thermometers in the refrigerator and freezer were working. The walnuts were packaged in a sealed bag on a shelf above the salad area There was no filed practice identified.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

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

Statement of Deficiencies	License #: 2241	Compliance Determination # 71840
Plan of Correction	AEGIS OF MADISON	Completion Date
Page 1 of 3	Licensee: Aegis Senior Communities LLC	01/28/2026

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 01/23/2026 of:

AEGIS OF MADISON
2200 E Madison St
Seattle, WA 98112

This document references the following complaint number(s): 208452

The following sample was selected for review during the unannounced on-site visit: 3 of 77 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Cathy Prentice, Complaint Investigator

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

Statement of Deficiencies	License #: 2241	Compliance Determination # 71840
Plan of Correction	AEGIS OF MADISON	Completion Date
Page 2 of 3	Licensee: Aegis Senior Communities LLC	01/28/2026

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.

Jessica Singer — Residential Care Services

2/9/2026 — 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)

2/10/26 — Date

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

(2) Ensure employees working as food service workers obtain a food worker card according to chapter 246-217 WAC; and

This requirement was not met as evidenced by:

Based on interview and record review the Assisted Living Facility (ALF) failed to ensure 2 of 6 food workers Staff (A and B) employed at the ALF had required food cards, and failed to ensure 1 of 6 food workers (Staff C) got the required food card within the required 14 days. This failure placed residents at risk for unsafe food practices due to untrained staff.

Findings included...

NOTE: Washington Administrative Code (WAC) 246-217-015 Applicability. (1) All food service workers must obtain a food worker card within fourteen calendar days from the beginning of employment at a food service establishment.

Review of records of current ALF kitchen staff showed, Staff A (Server) was hired on 10/14/2025 and had no food card; Staff B (Dishwasher) was hired on 11/10/2025 and had no food card. Staff C (Server) was hired on 10/07/2025 and did not get food card until 11/04/2025, 29 days after hire.

In an interview on 01/23/2026 at 3:30 PM, Staff C (Server) confirmed he was late getting his food card because life happened and he thought he had 30 days.

Statement of Deficiencies	License #: 2241	Compliance Determination # 71840
Plan of Correction	AEGIS OF MADISON	Completion Date
Page 3 of 3	Licensee: Aegis Senior Communities LLC	01/28/2026

In an interview on 01/26/2026 at 1:30 PM, Staff D (Director of Operations) confirmed Staff A and B had no food cards, and Staff C was late getting the food card. Staff D stated their policy is for kitchen staff to get the food card within 14 days and the facility is working on their tracking system to monitor that requirement.

This is a recurring deficiency previously cited 09/27/2024.

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 OF MADISON is or will be in compliance with this law and / or regulation on (Date) 3/14/26 .

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

Administrator (or Representative) Date 2/10/26