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 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) 84224 (Completion Date 09/28/2026) and 81024 (Completion Date 08/04/2026).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/28/2026 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-2474-2-e

The Department staff who did the on-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

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

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

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Statement of Deficiencies	License #: 2455	Compliance Determination # 81024
Plan of Correction	Aegis Living at Ravenna	Completion Date
Page 1 of 3	Licensee: Aegis Senior Communities LLC	08/04/2026

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 the unannounced on-site full inspection on 07/27/2026 and 07/28/2026 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: 7 of 56 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, Home and Community Living Administration
Residential Care Services, Region 2 , Unit J
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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Statement of Deficiencies	License #: 2455	Compliance Determination # 81024
Plan of Correction	Aegis Living at Ravenna	Completion Date
Page 2 of 3	Licensee: Aegis Senior Communities LLC	08/04/2026

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.

Jeanie Seigen
Residential Care Services

8/6/2026
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)

8/8/2026
Date

WAC 388-78A-2474 Training and home care aide certification requirements.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(e) Continuing education.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 6 sampled staff (Staff F) had completed the required annual 12 hours of continuing education (CE). This failure placed 56 residents at risk of harm from unqualified and untrained staff.

Findings included...

Continuing Education
WAC 388-112A-0611
Who in an assisted living facility is required to complete continuing education training each year, how many hours of continuing education are required, and when must they be completed?
(1) The continuing education training requirements that apply to certain individuals working in assisted living facilities are described in this section.
(a) The following long-term care workers must complete 12 hours of continuing education by their birthday each year:
(i) A certified home care aide;
(ii) A long-term care worker who is exempt from the 70-hour home care aide basic training under WAC 388-112A-0090 (1) and (2);
(iii) A certified nursing assistant;

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Page 3 of 3	Licensee: Aegis Senior Communities LLC	08/04/2026

(i) Must complete 12 hours of continuing education by the long-term care worker's birthday each calendar year worked thereafter

Review of staff records on 07/27/2026 showed the ALF hired Staff F (Medication Care Manager-Home Care Aide-HCA) on 05/06/2022. Record review showed Staff F did not have the required annual 12 hours of continuing education between the years 2025 and 2026 of Staff F's month and day of birth as required for a credentialed HCA. Record review showed Staff F renewed their HCA license on 02/15/2026.

During an interview, on 07/28/2026 at 10:30 AM, Staff H (Business Office Manager) stated Staff F had not attended the scheduled classes and was unable to provide proof Staff F had completed the required 12 hours of continuing education within the last year of their employment.

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) 9/18/26 .

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

Administrator (or Representative) — Date: 8/8/26

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

RE: Aegis Living at Ravenna # 2455

Dear Administrator:

The Department completed a full inspection of your Assisted Living Facility on 08/04/2026 and found that your facility does not meet the Assisted Living Facility requirements.

The Department:
- Wrote the enclosed report; and
- May take licensing enforcement action based on many deficiency listed on the enclosed report; and
- May inspect your program to determine if you have corrected all deficiencies; and
- Expects all deficiencies to be corrected within the timeframe accepted by the department.

You Must:
- Begin the process of correcting the deficiency or deficiencies immediately;
- Contact the Field Manager for clarifications related to the Statement of Deficiencies (SOD);

- Within 10 calendar days after you receive this letter, complete and return the enclosed 'Plan/Attestation Statement';
  - o Sign and date the enclosed report;
  - o For each deficiency, indicate the date you have or will correct each deficiency;
  - o Return the Plan/Attestation Statement and report with signatures to:

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

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

eFax: (206) 971-6791
Email: rcsregion2email@dshs.wa.gov
Optional method:
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

• Complete correction(s) within 45 calendar days of Last Date of Data Collection (08/04/2026), no later than 09/18/2026 or sooner if directed by the Department, after review of your proposed correction dates.
• Have your plan of correction available for review upon request from the Department.

Consultation(s):
In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

WAC 388-78A-2950 Water supply. The assisted living facility must:

(6) Provide all sinks in resident rooms, toilet rooms and bathrooms, and bathing fixtures used by residents with hot water between 105 F and 120 F at all times; and

The Assisted Living Facility (ALF) failed to ensure the hot water temperature in the ALF was greater than the minimum required 105 degrees Fahrenheit (F). This failure placed 56 of 56 residents at risk of harm from a potential infection control issues and decreased quality of life.

You Are Not:
• Required to submit a plan of correction for the consultation deficiency or deficiencies stated in this letter and not listed on the enclosed report.

You May:
• Contact me for clarification of the deficiency or deficiencies found.

In Addition, You May:
• Request an **Informal Dispute Resolution (IDR)** review within 10 working days after you receive this letter. Your IDR request **must** include:
  o What specific deficiency or deficiencies you disagree with;
  o Why you disagree with each deficiency; and
  o Whether you want an IDR to occur in-person, by telephone or as a paper review.
  o You can make an IDR request and find directions on the IDR web page at: https://www.dshs.wa.gov/altsa/idr

If You Have Any Questions:

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• Please contact me at (253)312-1446.

Sincerely,

Jamie Singer

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

Enclosure

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