



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

PSL Associates, LLC  
Cordata Court, Assisted Living & Memory Care  
4415 Columbine Dr  
Bellingham, WA 98226

RE: Cordata Court, Assisted Living & Memory Care License # 2481

Dear Administrator:

This letter addresses Compliance Determination(s) 68136 (Completion Date 11/05/2025) and 64318 (Completion Date 09/02/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 11/05/2025 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-3090-1-a, WAC 388-78A-3090-1

The Department staff who did the on-site verification:  
Melissa Phillips, Long Term Care Surveyor

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.



## Residential Care Services Investigation Summary Report

**Provider/Facility:** Cordata Court, Assisted  
Living & Memory Care  
**License/Cert.#:** 2481

**Provider Type:** Assisted Living Facility

**Compliance Determination #:** 64318

**Intake ID:** 190081

**Investigator:** Helen Fisher

**Region/Unit #:** RCS Region 2 / Unit J

**Investigation Date(s):** 08/20/2025 through 09/02/2025

**Complainant Contact Date(s):**

### Allegation(s):

The Named Resident (NR) had an injury with unknown source.

### Investigation Methods:

|                        |                                                                                     |
|------------------------|-------------------------------------------------------------------------------------|
| <b>Sample:</b>         | Total residents: 72<br>Resident sample size: 6<br>Closed records sample size: 0     |
| <b>Observations:</b>   | Residents.<br>Environment.                                                          |
| <b>Interviews:</b>     | Residents, Nursing Staff, Direct Care Staff. Regional Director of Operations (RDO). |
| <b>Record Reviews:</b> | Resident's care plan, progress notes.                                               |

### Investigation Summary:

Review of the investigative report showed that the ALF responded in a timely manner, assessed the NR and ruled out abuse and neglect. The NR had a history of getting down and crawling the floor and attempted to get self off the floor. However, during observations two residents rooms appeared unkept, unclean with foul urine odor. Failed practice was identified. A citation was written for non-compliance with Washington Administrative Code 388-78A-3090 Maintenance and housekeeping.

### Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A



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|                           |                                              |                                  |
|---------------------------|----------------------------------------------|----------------------------------|
| Statement of Deficiencies | License #: 2481                              | Compliance Determination # 64318 |
| Plan of Correction        | Cordata Court, Assisted Living & Memory Care | Completion Date                  |
| Page 1 of 4               | Licensee: PSL Associates, LLC                | 09/02/2025                       |

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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 08/20/2025 of:

Cordata Court, Assisted Living & Memory Care  
4415 Columbine Dr  
Bellingham, WA 98226

This document references the following complaint number(s): 190081, 192084

The following sample was selected for review during the unannounced on-site visit: 6 of 72 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Helen Fisher, Complaint Investigator

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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|                           |                                              |                                  |
|---------------------------|----------------------------------------------|----------------------------------|
| Statement of Deficiencies | License #: 2431                              | Compliance Determination # 64318 |
| Plan of Correction        | Cordata Court, Assisted Living & Memory Care | Completion Date                  |
| Page 2 of 4               | Licensee: PSL Associates, LLC                | 09/02/2025                       |

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.

*Jennie Singer*  
Residential Care Services

9/8/2025

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.

*[Signature]*  
Administrator (or Representative)

9/8/25  
Date

#### WAC 388-78A-3090 Maintenance and housekeeping.

(1) The assisted living facility must:

(a) Provide a safe, sanitary and well-maintained environment for residents;

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

Based on observations and interviews, the Assisted Living Facility (ALF) failed to ensure a system was in place to maintain the cleanliness of 2 of 3 residents' (Resident 1 and 2's) rooms. This failure resulted in Resident 1's room being unclean and unsanitary and placed Resident 1 and 2 at risk for a diminished quality of life.

#### Findings included...

Review of the ALF's "Disclosure of Services" showed, "Housekeeping: All assisted living facilities must maintain your living quarters and other areas you may use in a safe, clean and comfortable condition." And "Weekly cleaning of your apartment is included in your monthly fee."

#### Resident 1

Review of undated Face Sheet (FS) showed the ALF admitted Resident 1 on [REDACTED]/2015 with multiple disabling diagnoses. A Negotiated Service Agreement (NSA), dated 08/05/2025, showed Resident 1 needed assistance with housekeeping.

In an observation, on 08/20/2025 at 10:41 AM, Resident 1's apartment carpet had multiple brownish and yellow stains from the front door all the way to the living room approximately 10 feet long by 2.5 feet wide. The bedroom floor had stains measuring 3

x 3 inches, 4 x 4 inches and 6 x 6 inches. A strong urine odor in the bedroom was present.

In an interview, on 08/20/2025 at 10:55 PM, Staff A (Caregiver) stated that they noticed the stains on Resident 2 carpeting on 07/01/2025 and made a report to the administrative office.

In an interview, on 08/27/2025 at 2:09 PM, Staff B (Housekeeping Staff) stated that they had been requesting a work order for Resident 1's carpet stains. Staff B stated that ALF did not have a maintenance director to do carpet cleaning.

In an interview, on 08/28/2025 at 12:51 PM, Collateral Contact (CC) Private Caregiver stated that Resident 1's floor had been dirty, stained on few occasions and had a urine smell when they came to visit in the last 3 months. CC stated that they had been cleaning Resident 1's floor using their own supplies. CC stated that they made reports to staff but were unaware of what was done to address their concerns.

## Resident 2

Review of undated FS showed the ALF admitted Resident 2 on [REDACTED]/2017 with multiple disabling diagnoses. An NSA, dated 05/20/2025, showed Resident 2 needed assistance with housekeeping.

In an observation, on 09/25/2024 at 11:32 AM, Resident 2's apartment had a foul smell of urine from the apartment's entrance, living room and the walk-in closet.

In an interview, on 08/20/2025 at 12:02 PM, Staff C (Regional Director of Operations) stated that the maintenance director had been gone, and they were in the process of hiring a replacement. Staff C stated that they were unaware that Resident 1's and Resident 2's apartments needed immediate attention. Staff C stated that the strong urine smell in Resident 2's room may have been from Resident 2's recliner chair. Staff C stated that they were going to have someone to clean both apartments.

The deficiency was previously cited on 10/04/2023.

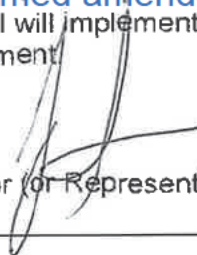
|                           |                                              |                                 |
|---------------------------|----------------------------------------------|---------------------------------|
| Statement of Deficiencies | License #: 2481                              | Compliance Determination #64318 |
| Plan of Correction        | Cordata Court, Assisted Living & Memory Care | Completion Date                 |
| Page 4 of 4               | Licensee: PSL Associates, LLC                | 09/02/2025                      |

**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, Cordata Court, Assisted Living & Memory Care is or will be in compliance with this law and / or regulation on (Date) ~~10/16/25~~ **10/17/2025**

**SB confirmed amended POC date with Provider on 9/9/2025.**

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

  
Administrator (or Representative)

**9/9/25**  
Date

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