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

International Community Health Services
Legacy House
803 South Lane Street
SEATTLE, WA 98104

RE: Legacy House License # 2493

Dear Administrator:

This letter addresses Compliance Determination(s) 69828 (Completion Date 12/09/2025) and 66603 (Completion Date 10/06/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 12/09/2025 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-2040-1, WAC 388-78A-2040-2, WAC 388-78A-2040

The Department staff who did the on-site verification:
Lisa Hauk, 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: Legacy House
Provider Type: Assisted Living Facility
License/Cert.#: 2493
Compliance Determination #: 66603
Intake ID: 195465
Investigator: Lisa Hauk
Region/Unit #: RCS Region 2 / Unit J
Investigation Date(s): 10/02/2025 through 10/06/2025
Complainant Contact Date(s):

Allegation(s):
The Assisted Living Facility (ALF) failed their 2nd fire and life safety inspection and was issued a State Fire Marshal's Office Letter of Non-Compliance from Deputy State Fire Marshal.

Investigation Methods:

Sample:	Total residents: 74 Resident sample size: 74 Closed records sample size: 0
Observations:	Residents Dining Staff to resident interactions Resident to resident interactions
Interviews:	Administration Maintenance staff
Record Reviews:	Letters of non-compliance from the State Fire Marshal

Investigation Summary:
Record Review of the Washington State Patrol Fire Inspection Report dated 09/18/2025, showed the ALF had not corrected violations from two previous inspections dated 05/21/2025 and 02/11/2025. Interview showed that repairs were scheduled and an inspection would need to be scheduled after the repairs were completed. See citation WAC 388-78A-2040(1)(2).

Conclusion / Action:

- [x] 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 #: 2493	Compliance Determination # 66603
Plan of Correction	Legacy House	Completion Date
Page 1 of 3	Licensee: International Community Health Services	10/06/2025

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 an unannounced on-site complaint investigation on 10/02/2025 of:

Legacy House
803 South Lane Street
SEATTLE, WA 98104

This document references the following complaint number(s): 195465

The following sample was selected for review during the unannounced on-site visit: 74 of 74 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Lisa Hauk, 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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Page 2 of 3	Licensee: International Community Health Services	10/06/2025

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.

Janice Seigen
Residential Care Services

10/7/2025
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)

10/15/2025
Date

WAC 388-78A-2040 Other requirements.

(1) The assisted living facility must comply with all other applicable federal, state, county and municipal statutes, rules, codes and ordinances, including without limitations those that prohibit discrimination.

(2) The assisted living facility must have its building approved by the Washington state fire marshal in order to be licensed.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure compliance with the Washington State Patrol Office of State Fire Marshal (OSFM) when the ALF failed their follow-up Fire and Life Safety Inspection (LSI). This placed 74 residents, staff, and visitors' safety at risk.

Findings included...

Review of the Department's Facility Management System, on 10/02/2025, showed the ALF was licensed for 74 beds.

In interview, on 10/02/2025, at 12:48 pm, Staff A (Facility Supervisor) stated the ALF provided care and services to 74 residents.

Review of records from the OSFM, showed the ALF failed their initial LSI on 02/11/2025. Records showed the ALF failed the OSFM follow-up visit on 05/21/2025 and 09/18/2025. The follow-up visit on 09/18/2025 showed the ALF failed to comply with the following National Fire Protection Association codes (NFPA):

Statement of Deficiencies	License #: 2493	Compliance Determination # 66603
Plan of Correction	Legacy House	Completion Date
Page 3 of 3	Licensee: International Community Health Services	10/06/2025

NFPA 80 Fire/Smoke dampers inspection testing:
At the time of inspection, the following paperwork was not provided: 1. Fire/smoke damper inspection will need to be performed and documented. All inspection reports must verify that the system has no deficiencies or document that all deficiencies have been corrected.

In interview, on 10/02/2025, at 12:48 pm, Staff B (Director of Facilities) stated that two fire/smoke dampers were scheduled to be installed and inspected.

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, Legacy House is or will be in compliance with this law and / or regulation on (Date) 10/15/2025 .

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

Administrator (or Representative) — Date: 10/15/2025