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

07/08/2025

LC Lynnwood Operator LLC
Quail Park of Lynnwood
4015 164th St SW
Lynnwood, WA 98087

RE: Quail Park of Lynnwood # 2700

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 62207 (Completion Date 07/08/2025) and 60051 (Completion Date 05/28/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/08/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
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.

The Department staff who did the On Site verification:
Michelle Mcglon, Nursing Consultant Institutional

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

Sincerely,

Jamie Singer, Field Manager

Region 2, Unit J
Residential Care Services

Jamie Singer

Residential Care Services
Investigation Summary Report

Provider/Facility: Quail Park of Lynnwood
Provider Type: Assisted Living Facility

License/Cert.#: 2700
Intake ID: 178768
Compliance Determination #: 60051
Region/Unit #: RCS Region 2 / Unit J
Investigator: Jamie Singer
Investigation Date(s): 05/22/2025 through 05/28/2025
Complainant Contact Date(s):

Allegation(s):
1. The Assisted Living Facility (ALF) failed compliance with the State Fire Marshal.

Investigation Methods:

Sample:	Total residents: 130 Resident sample size: Closed records sample size:
Observations:	Residents Residents Dining Kitchen
Interviews:	Nursing staff Executive Director
Record Reviews:	ALF Disaster Preparedness for Fire State Fire Marshal

Investigation Summary:
1. Record Review of the Washington State Patrol Fire Inspection Report dated, showed the ALF had not corrected violations from a previous inspection. In an interview, the Executive Director stated that the Engineering Director was no longer employed by the ALF, and the ALF was working to correct the violations. See citation WAC 388-78A-2040 for 05/27/2025.

Conclusion / Action:

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

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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 05/22/2025 of:

Quail Park of Lynnwood
4015 164th St SW
Lynnwood, WA 98087

This document references the following complaint number(s): 178768

The following sample was selected for review during the unannounced on-site visit: 0 of 130 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Michelle Mcglon, Nursing Consultant Institutional
Jamie Singer, Field Manager

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit J
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

Statement of Deficiencies	License #: 2700	Compliance Determination #: 63051
Plan of Correction	Quail Park of Lynnwood	Completion Date
Page 2 of 3	Licensee: LC Lynnwood Operator LLC	05/28/2025

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.

Jamie Seiger
Residential Care Services

6/2/2025
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.

Marian Sauls
Administrator (or Representative)

6/4/25
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 Fire Marshal Office (OSFM) when the ALF failed their second follow-up Fire and Life Safety Inspection (LSI). This placed 130 assisted living residents, staff, and visitors' safety at risk.

Findings included...

Review of the Department's Secure Tracking and Reporting System, on 05/22/2025, showed the ALF was licensed for 227 beds. Review of a Resident Characteristic Roster showed the ALF was providing care and services for 130 residents.

Review of records from the OSFM, showed the ALF failed their initial LSI on 01/23/2025 and their first follow-up visit on 02/26/2025. The second follow-up visit on 05/05/2025 showed the ALF failed to comply with following International Fire Codes (IFC).
IFC 706.2.4 2021- showed the fire rated cross corridor door near room six would not close and latch from the fully open position. Resident room 150 fire door would not close and latch from the fully open position.

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.

Residential Care Services | 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) | Date

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IFC 705.2.4 2021- showed the fire rated cross corridor door near room six would not close and latch from the fully open position. Resident room 150 fire door would not close and latch from the fully open position.

Statement of Deficiencies	License #: 2780	Compliance Determination #50051
Plan of Correction	Quail Park of Lynnwood	Completion Date
Page 3 of 3	Licensee: LC Lynnwood Operator LLC	06/28/2025

IFC 903.3.302021- the sprinkler head in the hallway near 159 was recessed in the ceiling which would prevent proper water flow pattern.

IFC 903.5.2021-there was a sprinkler head in the hallway near room 214 had paint on the head and must be replaced.

IFC 904.13.5.202021-the second-floor memory care kitchen suppression system was yellow tagged. All five UL three hundred fusible links currently installed with no evidence of a proper heat test in accordance with the manufacturer's instructions.

In an interview, on 05/27/2025 at 1:54 PM, Staff A (Executive Director) stated that the Engineering Director was no longer employed by the ALF, and she was aware of the violations.

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, Quail Park of Lynnwood is or will be in compliance with this law and / or regulation on (Date) 7/4/25

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

Marian Sauls
Administrator (or Representative)

6/4/25
Date

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

_____ _____

Administrator (or Representative) Date