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

09/25/2025

Lynden ALC LLC
Lynden Manor
905 Aaron Dr
Lynden, WA 98264

RE: Lynden Manor # 2641

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 66161 (Completion Date 09/25/2025) and 61907 (Completion Date 07/21/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/25/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-3090 Maintenance and housekeeping.

(1) The assisted living facility must:

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

The Department staff who did the On Site verification:
Helen Fisher, 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: Lynden Manor
Provider Type: Assisted Living Facility
License/Cert.#: 2641
Compliance Determination #: 61907
Intake ID: 184195
Investigator: Helen Fisher
Region/Unit #: RCS Region 2 / Unit A
Investigation Date(s): 07/02/2025 through 07/21/2025
Complainant Contact Date(s): 07/02/2025

Allegation(s):
The Unnamed Resident (UR) was pouring an unknown liquid and throwing dirty undergarment outside the window.

Investigation Methods:

Sample:	Total residents: 93 Resident sample size: 3 Closed records sample size:
Observations:	Residents. Environment.
Interviews:	NR, Collateral contact, other not associated with facility, Nursing staff, Direct Care Staff,
Record Reviews:	Residents' care plan, progress notes.

Investigation Summary:
The UR was identified. There was no soiled undergarments found outside the Identified Resident (IR's window). However, inside the IR's room found feces splattered on the window glass, window frame, on floor and on the window curtain were observed during an unannounced onsite visit at the facility. Failed practice. A citation was written for noncompliance with WAC 388-78A-3090 Maintenance and housekeeping. See Statement of Deficiencies dated 07/21/2025.

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

AGING AND LONG-TERM SUPPORT ADMINISTRATION

3906-172nd St NE, Suite #100, Arlington, WA 98223

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 07/02/2025 of:

Lynden Manor
905 Aaron Dr
Lynden, WA 98264

This document references the following complaint number(s): 184195

The following sample was selected for review during the unannounced on-site visit: 3 of 93 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 A
3906-172nd St NE, Suite #100
Arlington, WA 98223

Statement of Deficiencies	License #: 2641	Compliance Determination # 61907
Plan of Correction	Lynden Manor	Completion Date
Page 2 of 3	Licensee: Lynden ALC LLC	07/21/2025

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.

Anthony Davis — Residential Care Services — 7/22/2025 — 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.

[redacted] — Administrator (or Representative) — 7/30/25 — 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, interviews, and record reviews, the Assisted Living Facility (ALF) failed to ensure a system was in place to maintain the cleanliness of 1 of 3 resident's (Resident 1's) rooms. This failure resulted in Resident 1's room being unclean and unsanitary and placed Resident 1 at risk for a diminished quality of life.

Findings included...

Review of the ALF's Title "Disclosure of Services" (DSHS 10-351 Rev. 03/2017) showed, "Housekeeping: All assisted living facilities must maintain your living quarters and other areas you may use in a safe, clean and comfortable condition."

Record review showed Resident 1 was admitted to the Assisted Living Facility (ALF) on [redacted]/2024 with multiple diagnoses. A Negotiated Service Agreement, dated 05/06/2025, showed Resident 1 needed assistance with weekly housekeeping and daily bed making.

Observation, on 07/02/2025 at 10:45 AM, in Resident 1's room showed their floor had scattered food and paper debris, and dresser drawers were smeared of feces. The bottom of the windowsill and window glass had splattered feces all over, and the curtain had a one and a half by two and a half inch feces mark. The bed was unmade.

In an interview, on 07/02/2025 at 11:00 PM, Staff A (Caregiver) stated that they did not see the feces on the windowsill and on the curtain. Staff A stated that Resident 1's room was getting cleaned weekly and the care staff were supposed to clean in between the housekeeping schedule. Staff A was unable to state when Resident 1's room was last cleaned.

In an interview, on 07/02/2025 at 11:13 PM, Staff B (Director of Nursing) stated that they were not aware of Resident 1's room condition. Staff B stated that Resident 1 had a history of throwing their dirty briefs out the window, which may have been the reason why there were feces on the windowsill. Staff B stated that the care staff were instructed to check and clean the residents' room every day when there is a need.

In an interview, on 07/21/2025 at 8:36 AM, Collateral Contact (CC – Resident 1's Representative) stated that they have had an ongoing cleanliness problem with Resident 1's room in the last four months. CC stated that they were finding feces on Resident 1 floor on a regular basis.

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, Lynden Manor is or will be in compliance with this law and / or regulation on (Date) 9/4/25 .

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

Administrator (or Representative) — Date: 7/30/25