



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

10/21/2025

eliseo
eliseo
1301 N HIGHLAND PARKWAY
TACOMA, WA 98406

RE: eliseo # 1187

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 67511 (Completion Date 10/21/2025) and 62587 (Completion Date 07/15/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 10/21/2025 and found no deficiencies.

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

WAC 388-78A-2040 Other requirements.

(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:

Lisa Mason, NCI ALF Licenser

If you have any questions, please contact me at (253)442-3013.

Sincerely,

Laurie Anderson, Community Field Manager
Region 3, Unit D
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: eliseo

Provider Type: Assisted Living Facility

License/Cert.#: 1187

Compliance Determination #: 62587

Intake ID: 183480

Investigator: Lisa Mason

Region/Unit #: RCS Region 3 / Unit D

Investigation Date(s): 07/15/2025 through 07/15/2025

Complainant Contact Date(s):

Allegation(s):

A facility failed a fire safety inspection.

Investigation Methods:

Sample:	Total residents: 51 Resident sample size: 0 Closed records sample size:
Observations:	Resident rooms Activities
Interviews:	Maintenance staff
Record Reviews:	Maintenance logs

Investigation Summary:

A facility failed a fire inspection and had since done the repairs before the department investigated. Maintenance Director interview said the Fire Marshalls office would accept the final report once sent and put the facility back in compliance.

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 #: 1187	Compliance Determination # 62587
Plan of Correction	eliseo	Completion Date
Page 1 of 3	Licensee: eliseo	07/15/2025

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 07/15/2025 of:

eliseo
1301 N HIGHLANDS PARKWAY
TACOMA, WA 98406

This document references the following complaint number(s): 183480

The following sample was selected for review during the unannounced on-site visit: 0 of 51 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Lisa Mason, NCI ALF Licenser

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit D
PO Box 99250
Lakewood, WA 98496

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

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

WAC 388-78A-2040 Other requirements.

(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 maintain compliance with the State Fire Marshal codes for Long Term Care facilities. This failure placed 51 residents at risk of harm in the event of an emergency.

Record review of the Washington State Patrol Fire Protection Bureau non-compliance letter dated 05/20/2025 showed the facility failed a reinspection on 05/20/2025 with the following findings:

"3 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901.
(IFC 903.5 2021)

Findings during the reinspection were:

Unable to provide fire sprinkler system documentation that provides information for the following inspections:

- Last 5-year inspection/test report(s)- conducted May 2023
- Last 5-year FDC hydro test report- unknown if conducted"

On 07/15/2025 at 11:00am, an interview with Staff A, the Maintenance Supervisor, said the facility was waiting on the final report for the completed hydro test. He was told by Fire Marshall to send the report once completed. The facility would then be in compliance; no further Fire Marshall onsite visit was required.

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, eliseo is or will be in compliance with this law and / or regulation on (Date)_____.

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

Administrator (or Representative)

Date