



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

04/30/2025

BROOKDALE SENIOR LIVING COMMUNITIES INC
Brookdale Richland
1629 GEORGE WASHINGTON WAY
RICHLAND, WA 99352

RE: Brookdale Richland # 1696

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 55631 (Completion Date 04/30/2025) and 52757 (Completion Date 01/14/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 04/30/2025 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:
Melissa Milanez, Community Complaint Investigator

If you have any questions, please contact me at (509)208-5231.

Sincerely,

Laura Williams-Davis, ALF Field Manager
Region 1, Unit G
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: Brookdale Richland

Provider Type: Assisted Living Facility

License/Cert.#: 1696

Compliance Determination #: 52757

Intake ID: 161625

Investigator: Melissa Milanez

Region/Unit #: RCS Region 1 / Unit G

Investigation Date(s): 01/09/2025 through 01/14/2025

Complainant Contact Date(s):

Allegation(s):

Facility failed 2nd fire and life safety inspection.

Investigation Methods:

Sample:	Total residents: 100 Resident sample size: 8 Closed records sample size:
Observations:	Dining Resident care equipment Resident rooms Staff to resident interactions
Interviews:	Identified staff Residents Maintenance staff
Record Reviews:	Washington State Patrol Fire Protection Bureau reports Washington State Patrol Fire Protection Bureau non-compliance letter Maintenance logs

Investigation Summary:

The department investigated notification by Washington State Patrol Fire Protection Bureau of facility failure to pass two fire inspections. Interview and record review showed the facility failed to pass two fire and life safety inspections. Failed facility practice for 388-78A-2040(2).

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 #: 1696	Compliance Determination # 52757
Plan of Correction	Brookdale Richland	Completion Date
Page 1 of 3	Licensee: BROOKDALE SENIOR LIVING COMMUNITIES INC	01/14/2025

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 01/09/2025 of:

Brookdale Richland
1629 George Washington Way
Richland, WA 99354

This document references the following complaint number(s): 159014, 161625, 161944, 162154

The following sample was selected for review during the unannounced on-site visit: 8 of 100 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Melissa Milanez, Community Complaint Investigator
Laurel Knight, Community Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit G
1200 Alder Street
Union Gap, WA 98903

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 ensure compliance with the Washington State Patrol Office of State Fire Marshal (OSFM) when the ALF failed their second Fire and Life Safety Inspection (LSI). This failure placed residents, staff and visitors' safety at risk.

Findings included...

Review of the Department's Electronic Working Papers System, on 08/16/2024, showed the ALF was licensed for 159 beds.

In an interview on 01/09/2025 at 11:20AM PM, Staff A, Executive Director, stated there were currently 100 residents in the facility.

Review of records from the OSFM, showed the ALF failed their initial LSI on 05/29/2024, then failed their first OSFM reinspection on 07/22/2024.

Review of the most recent failed LSI report, dated 07/22/2024, showed the facility continued to be out of compliance with International Fire Code (IFC) standards in multiple categories. The Statement of Violation noted the following:

The facility was found to be out of compliance in 6 of 29 code requirements, as follows:

Opening Protectives-Floor Openings and Shafts (IFC 0704.2), Inspection and Maintenance (IFC 705.2 2021), Door Operation (IFC 705.2.4 2021), Duct and Air Transfer Openings-Maintaining Protection (IFC 706.1 2018), Testing and Maintenance (IFC 903.5 2021), Smoke Detector Sensitivity (IFC 907.8.3 2021).

In an interview on 01/09/2024 at 12:17pm, Staff A, Executive Director, stated they were aware the facility fire inspection on 07/22/2024 conducted by OSFM was the second failed fire safety inspection for the facility. Staff A further stated that maintenance was currently working on resolving the issues identified in the fire marshal's inspection report.

In an interview on 01/09/2024 at 12:56pm, Staff B, Maintenance Director, stated they had only been in the role for five months, and they were still familiarizing themselves with everything that needed to be done. Staff B also stated they hired an assistant to help them with the tasks that needed to be completed and repaired.

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, Brookdale Richland 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