



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

COMPREHENSIVE HEALTHCARE
GLEED ORCHARD MANOR
PO BOX 959
YAKIMA, WA 98907

RE: GLEED ORCHARD MANOR License # 1916

Dear Administrator:

This letter addresses Compliance Determination(s) 66627 (Completion Date 10/02/2025) and 63086 (Completion Date 08/04/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 10/02/2025 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-2466-1-a, WAC 388-78A-2466-1-b, WAC 388-78A-2466-1

The Department staff who did the on-site verification:
Tracy Ramirez, Assisted Living Facility Licensors

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

Sincerely,

Laura Williams-Davis

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.



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1200 Alder Street, Union Gap, WA 98903

Statement of Deficiencies	License #: 1916	Compliance Determination # 63086
Plan of Correction	GLEED ORCHARD MANOR	Completion Date
Page 1 of 3	Licensee: COMPREHENSIVE HEALTHCARE	08/04/2025

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 the unannounced on-site full inspection on 07/21/2025, 07/22/2025, 07/23/2025 and 07/24/2025 of:

GLEED ORCHARD MANOR
30 LINK RD
GLEED, WA 98908

The following sample was selected for review during the unannounced on-site visit: 5 of 21 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Anna Cairns, ALF Long Term Care Surveyor
Tracy Ramirez, Assisted Living Facility Licensors

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

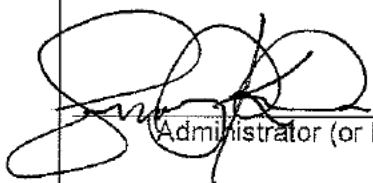
This document was prepared by Residential Care Services for the Locator website.

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.

Laura Williams-Davis
Residential Care Services

08/12/2025
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.


Program Manager
Administrator (or Representative)

8/25/2025
Date

WAC 388-78A-2466 Background checks Washington state name and date of birth background check Valid for two years National fingerprint background check Valid indefinitely.

(1) A Washington state name and date of birth background check is valid for two years from the initial date it is conducted. The assisted living facility must ensure:

(a) A new DSHS background authorization form is submitted to the department's background check central unit every two years for all administrators, caregivers, staff persons, volunteers and students; and

(b) There is a valid Washington state name and date of birth background check for all administrators, caregivers, staff persons, volunteers and students.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to maintain a valid two year name and date of birth background check for 3 of 3 staff (Staff B, E and F). This failure placed residents at risk of being cared for by disqualified staff.

Findings included...

Review of Staff B's, Caregiver, personnel file showed that they had been hired on 03/09/2020. Staff B's file showed that their previous Washington state name and date of birth background check was completed on 02/09/2022 and expired on 02/09/2024. Staff E's file did not include a valid Washington state name and date of birth background check, 530 days after their previous one had expired.

Review of Staff E's, Licensed Practical Nurse, personnel file showed that they had been hired on 01/03/2023. Staff E's file showed that their previous Washington state name and date of birth background check was completed on 01/05/2023 and expired on

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01/05/2025. Staff E's file did not include a valid Washington state name and date of birth background check, 199 days after their previous one had expired.

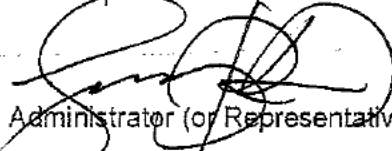
Review of Staff F's, Caregiver, personnel file showed that they had been hired on 07/25/2016. Staff E's file showed that their previous Washington state name and date of birth background check was completed on 06/23/2022 and expired on 06/23/2024. Staff F's file did not include a valid Washington state name and date of birth background check, 395 days after their previous one had expired.

In an interview on 07/23/2025 at 10:45 AM, Staff G, Regional Staff, acknowledged that Staff B, Staff E and Staff F did not have a valid Washington state name and date of birth background check in their personnel files.

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, GLEED ORCHARD MANOR is or will be in compliance with this law and / or regulation on (Date) 9/18/2025.

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



Program Manager

Administrator (or Representative)

Date 8/25/25