



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
800 NE 136th Ave Ste 200, Vancouver, WA 98684

04/14/2026

EMERITUS CORPORATION
Brookdale Fishers Landing
17171 SE 22ND DR
VANCOUVER, WA 98683

RE: Brookdale Fishers Landing # 2261

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 75321 (Completion Date 04/14/2026) and 69997 (Completion Date 01/13/2026).

The Department completed a follow-up inspection of your Assisted Living Facility on 04/14/2026 and found no deficiencies.

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

WAC 388-78A-2160 Implementation of negotiated service agreement. The assisted living facility must provide the care and services as agreed upon in the negotiated service agreement to each resident unless a deviation from the negotiated service agreement is mutually agreed upon between the assisted living facility and the resident or the resident's representative at the time the care or services are scheduled.

The Department staff who did the On Site verification:
Yvonne Chitekwe

If you have any questions, please contact me at (360)450-1218.

Sincerely,

Clinton Fridley, RN

Clinton Fridley, Community Nurse Field Manager
Region 3, Unit E



Residential Care Services Investigation Summary Report

Provider/Facility: Brookdale Fishers Landing **Provider Type:** Assisted Living Facility

License/Cert.#: 2261

Intake ID: 204425

Compliance Determination #: 69997

Region/Unit #: RCS Region 3 / Unit E

Investigator: Yvonne Chitekwe

Investigation Date(s): 12/11/2025 through 01/13/2026

Complainant Contact Date(s):

Allegation(s):

1. Quality of Care/Treatment: Allegation that the facility did not provide care according to resident's negotiated service agreement.

Investigation Methods:

Sample:	Total residents: 82 Resident sample size: 3 Closed records sample size: 0
Observations:	Residents Activities Dining Resident care equipment Resident rooms Staff to resident interactions Resident to resident interactions
Interviews:	Identified staff Nursing staff Caregivers Med-tech Residents Family members
Record Reviews:	Resident characteristic roster staff list face sheets negotiated service plan progress notes CARE assessment

Investigation Summary:

1. Quality of Care/Treatment: The on-site investigation was conducted in relation to all allegations and incidents identified in the intake. Based on interviews, observations and records review, failed facility practice in the allegation that the facility did not provide care to a resident as negotiated in a service plan was

substantiated during the investigation.

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A

01.20.2026 14:51:50

State of Washington



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave Ste 200, Vancouver, WA 98684

Statement of Deficiencies	License #: 2261	Compliance Determination # 69997
Plan of Correction	Brookdale Fishers Landing	Completion Date
Page 1 of 4	Licensee: EMERITUS CORPORATION	01/13/2026

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 12/11/2025 of:

Brookdale Fishers Landing
17171 SE 22ND DR
VANCOUVER, WA 98683

This document references the following complaint number(s): 204425

The following sample was selected for review during the unannounced on-site visit: 3 of 82 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Yvonne Chitekwe

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3, Unit E
800 NE 136th Ave Ste 200
Vancouver, WA 98684

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

Statement of Deficiencies	License #: 2261	Compliance Determination # 69997
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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.

Clinton Fridley RN

Residential Care Services

01/20/2026

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)

1/29/2026

Date

WAC 388-78A-2160 Implementation of negotiated service agreement. The assisted living facility must provide the care and services as agreed upon in the negotiated service agreement to each resident unless a deviation from the negotiated service agreement is mutually agreed upon between the assisted living facility and the resident or the resident's representative at the time the care or services are scheduled.

This requirement was not met as evidenced by:

Based on Interview and records review the facility failed to provide care and services as agreed upon in the personal service plan (the facility's version of the negotiated services agreement [NSA]) for 1 of 3 sampled residents (Resident 1 [R1]). This failure resulted in Resident 1 requiring hospitalization and placed R1 at risk for health complications.

Findings included...

Record review of R1's admission record (Facesheet) dated 12/17/2025, showed that R1 moved into the facility on [REDACTED] 2021, with a diagnosis of [REDACTED]

and [REDACTED]

Record review of R1's NSA, dated 07/03/2025, showed R1 required caregiver physical assistance with dressing and grooming to help them dress upper and lower body in the mornings, they prefer to be woken up and dressed in the morning at 6:30 AM.

Record review of R1's assessment, dated 01/23/2025, showed R1 as total dependent and required one-person physical assistance, and that need were unmet at the time of the assessment.

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Record review of progress note, dated 12/02/2025 at 09:35 AM, documented R1 was not feeling well and at 2:53 PM documented R1 was sent to the hospital.

In an interview on 12/10/2025 at 5:06 PM collateral contact one (CC1), R1's Power of Attorney (POA), stated that they went to the facility to get R1 on 12/02/2025 at 9:00 AM to take them to an appointment. CC1 stated they could not get into R1's apartment because the door was locked when it was supposed to be unlocked. CC1 stated they went to get staff help to unlock R1's door. Staff B unlocked the door. CC1 found R1 in distress, still in bed in their nightgown, they had pooped in their pants, they could not get to their call button that was placed on the walker which was away from them. CCI stated that R1 is usually up by 6:30 AM getting ready to go to breakfast at 7:30 AM.

In an interview on 12/12/2025 at 9:40 AM, Staff B, Medication Technician (Med-Tech), stated that R1's CC1 told them R1's apartment door was locked and that they came to get R1 for an appointment. Staff B stated they went with CC1 to unlock R1's apartment door, when the door opened, they found R1 still in bed, not cleaned up, one had helped them dress. Staff B stated that R1 was confused, not at baseline and complained they did not feel good. Staff B stated that R1's call light pendant was away from them hanging on their walker that was not reachable by R1.

In an interview on 12/11/2024 at 12:57 PM, Staff A, Executive Director, stated R1 needs help with dressing and toileting and the morning routine for R1 was not followed because staff did not check on them. Staff A stated that R1 did not feel well on this day, R1's call light pendant was placed on their walker and the walker was not close to R1.

In an interview on 12/16/2025 at 3:45 PM, Staff C, Resident Care Coordinator, stated they found R1 in their apartment and met with CC1, who told them that R1 called them the night before stating that they could not get up to use the restroom and could not find their call light, nor could they reach it and that they yelled for help but no one came. Staff C stated when they walked into R1's apartment they found R1 draped over the bed, covered in feces and R1 did not recognize CC1. Staff C stated that they took R1's vitals and noted that R1's oxygen level was at 85% on room air with sudden onset of weakness and confusion. Staff C called 911 and R1 was sent to the Hospital. Staff C stated that caregivers missed checking on R1 and that R1's morning routine was not followed.

Statement of Deficiencies

License #: 2261

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Plan of Correction

Brookdale Fishers Landing

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Licensee: EMERITUS CORPORATION

01/13/2026

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 Fishers Landing is or will be in compliance with this law and / or regulation on (Date) 3/12/2026

2/27/2026 (u)

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

Administrator (or Representative)



Date

1/29/2026