



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

Greenlake Management Pasco, LLC
Tri-Cities Assisted Living
2000 N 22nd Ave
Pasco, WA 99301

RE: Tri-Cities Assisted Living License # 2549

Dear Administrator:

This letter addresses Compliance Determination(s) 60263 (Completion Date 06/23/2025) and 57958 (Completion Date 04/15/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 06/23/2025 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-2040-2

The Department staff who did the off-site verification:
Elaine Lopez, Licensor

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.



Residential Care Services Investigation Summary Report

Provider/Facility: Tri-Cities Assisted Living **Provider Type:** Assisted Living Facility
License/Cert.#: 2549 **Intake ID:** 174961
Compliance Determination #: 57958 **Region/Unit #:** RCS Region 1 / Unit G
Investigator: Anna Cairns
Investigation Date(s): 04/15/2025 through 04/15/2025
Complainant Contact Date(s):

Allegation(s):

The facility had a second, failed Deputy State Fire Marshal inspection.

Investigation Methods:

Sample: Total residents: 87
Resident sample size: 0
Closed records sample size: 0

Observations: Common areas

Interviews: Administrator

Record Reviews: Characteristic roster
Deputy State Fire Marshal Inspections

Investigation Summary:

Interview and record review showed that the facility had a second, failed Deputy State Fire Marshal inspection. Failed practice identified. WAC 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 #: 2549	Compliance Determination # 57958
Plan of Correction	Tri-Cities Assisted Living	Completion Date
Page 1 of 3	Licensee: Greenlake Management Pasco, LLC	04/15/2025

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 04/15/2025 of:

Tri-Cities Assisted Living
2000 N 22nd Ave
Pasco, WA 99301

This document references the following complaint number(s): 174981

The following sample was selected for review during the unannounced on-site visit: 0 of 87 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Anna Cairns, ALF Long Term Care Surveyor

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

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Page 1 of 3	Licensee: Greenlake Management Pasco, LLC	04/15/2025

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The department completed data collection for an unannounced on-site complaint investigation on 04/15/2025 of:

Tri-Cities Assisted Living
2000 N 22nd Ave
Pasco, WA 99301

This document references the following complaint number(s): 174961

The following sample was selected for review during the unannounced on-site visit: 0 of 87 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Anna Cairns, ALF Long Term Care Surveyor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit G
1200 Alder Street
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Statement of Deficiencies	License #: 2549	Compliance Determination #57956
Plan of Correction	Tri-Cities Assisted Living	Completion Date
Page 2 of 3	Licensed: Greenlake Management Passo, LLC	04/15/2025

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.

Laura Williams-Davis
Residential Care Services

04/22/2025
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.

[Signature]
Administrator (or Representative)

4.24.25
Date

WAC 386-78A-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 facility failed to maintain compliance with the Washington State Patrol Fire Protection Bureau when the Deputy State Fire Marshal found the facility in violation of several codes during the initial inspection on 12/04/2024, and then continued violation of four codes during the reinspection of 03/17/2025. This failure placed residents living in the facility, staff, and visitors at risk of harm in the event of a fire.

Findings included...

Record review of the Washington State Patrol Fire Protection Bureau report, dated 12/04/2024, showed that facility failed their initial inspection. The follow-up inspection on 03/17/2025, showed that facility continued to violate the following requirements:

- Resident room door failed to close and latch.
- Fire sprinkler escutcheon ring was missing.
- Single station smoke alarms greater than 10 years old were observed in a resident room.
- The heat detector was missing the cover
- The facility could not provide documentation of annual service on the emergency generator.

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.

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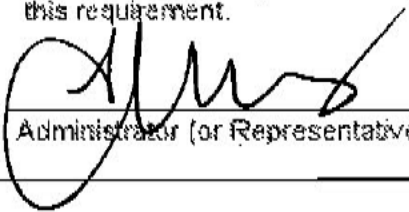
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Statement of Deficiencies	License # 2549	Compliance Determination # 57956
Plan of Correction	Tri-Cities Assisted Living	Completion Date
Page 3 of 3	Licensee: Greenlake Management Pasco, LLC	04/15/2025

In an interview on 04/15/2025 at 10:20 AM Staff A, Administrator, acknowledged that the facility was out of compliance with the Life Safety Code Inspection and requirements.

This
is an uncorrected deficiency previously cited on 12/04/2024

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, Tri-Cities Assisted Living is or will be in compliance with this federal Code regulation on (78-05) <u>57956</u>	
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.	
 Administrator (or Representative)	<u>4.24.25</u> Date

05/29/2025-confirmed by facility
Manager via telephone on 04/25/25 ME

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

In an interview on 04/15/2025 at 10:20 AM, Staff A, Administrator, acknowledged that the facility was out of compliance with the Life Safety Code Inspection and requirements.

This
is an uncorrected deficiency previously cited on 12/04/2024.

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, Tri-Cities Assisted Living 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

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