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

07/24/2025

Greenlake Management Columbian, LLC
Royal Columbian Senior Living
5615 W Umatilla Ave
Kennewick, WA 99336

RE: Royal Columbian Senior Living # 2581

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 63082 (Completion Date 07/24/2025) and 60173 (Completion Date 06/05/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/24/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
**WAC 388-78A-2462 Background checks Who is required to have.**

(2) The assisted living facility must ensure that the administrator and all caregivers employed directly or by contract after January 7, 2012 have the following background checks:

(b) A national fingerprint background check.

The Department staff who did the On Site verification:
Jessica Clapp, Assisted Living Facility 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
## Investigation Summary Report

**Provider/Facility:** Royal Columbian Senior Living
**License/Cert.#:** 2581
**Compliance Determination #:** 60173
**Investigator:** Jessica Clapp
**Investigation Date(s):** 05/28/2025 through 06/05/2025
**Complainant Contact Date(s):**

**Provider Type:** Assisted Living Facility

**Intake ID:** 180010
**Region/Unit #:** RCS Region 1 / Unit G

**Allegation(s):**

1. Named resident had not been moved to a larger room.
2. Named resident was accused of actions they did not do.
3. Missing electronic device.
4. Facility repeatedly doing named resident's laundry when plan was for representative to clean clothing and linens.
5. Residents at the facility were not served their meal.
6. Leaking plumbing in resident rooms.
7. The named resident's room was hot because of the air conditioning unit not working.

**Investigation Methods:**

| | |
|---|---|
| **Sample:** | Total residents: 99<br>Resident sample size: 3<br>Closed records sample size: 0 |
| **Observations:** | Identified resident<br>Residents<br>Activities<br>Dining<br>Resident care equipment<br>Resident rooms<br>Staff to resident interactions<br>Resident to resident interactions |
| **Interviews:** | Identified resident<br>Identified staff<br>Nursing staff<br>Residents<br>Family members<br>Housekeeping staff<br>Kitchen staff<br>Administrator |
| **Record Reviews:** | Medical records (face sheet, assessment, care plan, progress notes)<br>Facility policies |

Personnel files
Maintenance logs

**Investigation Summary:**

1. Record review showed that the named resident's room exceeded the required usable space. Interviews showed that the named resident had been told a room change could occur when a room was available and that a larger room had not been available. Observation showed that the named resident was the single occupant of the room and was able to access all areas of the space. No failed practice was identified.
2. Record review showed staff had observed the named resident's actions and interventions were initiated. Interviews showed the actions were discussed and alternatives reviewed with the named resident. No failed practice was identified.
3. Interview showed that the facility investigated and could not determine if the electronic device had been brought to the facility. Record review showed that a fingerprint background check was not completed for one staff. Failed practice was identified. Refer to Washington Administrative Code (WAC) 388-78A-24642(2)(b).
4. Record review showed that the named resident's preference for family to do laundry services. Interviews showed that the named resident's laundry was washed by family and not the facility. No failed practice was identified.
5. Observation showed that residents ate meals in the dining room and in their rooms. Interview showed that resident orders were taken in the dining room prior to the meal, before the meals when they chose to eat in their rooms and that when a resident had not placed an order, or was out of the facility during the meal, a meal was provided to them. No failed practice identified.
6. Record review showed that repair requests were completed by maintenance. Interviews showed a toilet had overflowed and was repaired immediately. Observation showed no leaking plumbing in resident rooms and that the named resident's toilet had been repaired and was functioning properly. No failed practice was identified.
7. Record review showed that the named resident's air conditioning unit had not been identified as needing repairs. Interview showed that the unit was replaced the same day when the issue was reported to management. No failed practice identified.

**Conclusion / Action:**

- [x] 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 #: 2581 | Compliance Determination # 60173 |
| Plan of Correction | Royal Columbian Senior Living | Completion Date |
| Page 1 of 3 | Licensee: Greenlake Management Columbian, LLC | 06/05/2025 |

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 05/28/2025 of:

Royal Columbian Senior Living
5615 W Umatilla Ave
Kennewick, WA 99336

This document references the following complaint number(s): 180010

The following sample was selected for review during the unannounced on-site visit: 3 of 99 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Jessica Clapp, Assisted Living Facility Licensor

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

| Statement of Deficiencies | License #: 2581 | Compliance Determination # 60173 |
|---|---|---|
| Plan of Correction | Royal Columbian Senior Living | Completion Date |
| Page 2 of 3 | Licensee: Greenlake Management Columbian, LLC | 06/05/2025 |

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

06/11/2025
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.

Administrator (or Representative)

6/11/2025
Date

**WAC 388-78A-2462 Background checks Who is required to have.**

(2) The assisted living facility must ensure that the administrator and all caregivers employed directly or by contract after January 7, 2012 have the following background checks:

(b) A national fingerprint background check.

**This requirement was not met as evidenced by:**

Based on interview and record review, the Assisted Living Facility failed to ensure that a national fingerprint background check was completed for 1 of 1 staff (Staff B). This failure placed residents at risk of being cared for by a disqualified staff member.

Findings included...

Review of Staff B's, Caregiver, personnel file showed that they were hired on 12/16/2024. Staff B's file did not show that a national fingerprint background check was completed and that it was 163 days past their hire date.

In an interview on 05/28/2025 at 3:30 PM, Staff A, Administrator, stated that they did not know why a national fingerprint background check was never completed.

| Statement of Deficiencies | License #: 2581 | Compliance Determination # 60173 |
|---|---|---|
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| Page 3 of 3 | Licensee: Greenlake Management Columbian, LLC | 06/05/2025 |

**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, Royal Columbian Senior Living is or will be in compliance with this law and / or regulation on (Date) 7/11/25.

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

Emily A. Mrz — Administrator (or Representative)

6/11/25 — Date