STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

03/31/2025

Spokane Valley Seniors Housing, LLC
Fields Senior Living at Spokane Valley
16512 E Desmet Court
Spokane Valley, WA 99016

RE: Fields Senior Living at Spokane Valley # 2669

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 57288 (Completion Date 03/31/2025) and 55570 (Completion Date 03/04/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 03/31/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2320 Intermittent nursing services systems.

(2) The assisted living facility providing nursing services, either directly or indirectly, must ensure that the nursing services systems include:

(b) Nurse delegation, if provided;

(3) The assisted living facility must ensure that all nursing services, including nursing supervision, assessments, and delegation, are provided in accordance with applicable statutes and rules, including, but not limited to:

(c) Chapter 246-840 WAC, Practical and registered nursing;

The Department staff who did the On Site verification:
Anne Sinclair, NCI Community Complaint Investigator
Abigail Vanderkolk, Community Complaint Investigator

If you have any questions, please contact me at (509)993-7821.

Sincerely,

Stephanie Jenks, Community Field Manager
Region 1, Unit B
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: Fields Senior Living at Spokane Valley
License/Cert.#: 2669
Compliance Determination #: 55570
Investigator: Anne Sinclair
Provider Type: Assisted Living Facility
Intake ID: 168318
Region/Unit #: RCS Region 1 / Unit B
Investigation Date(s): 02/27/2025 through 03/04/2025
Complainant Contact Date(s):

Allegation(s):

1. No Nurse Delegation.
2. Falsifying resident documents.

Investigation Methods:

Sample:	Total residents: 69 Resident sample size: 8 Closed records sample size: 0
Observations:	Residents Dining Activities Staff to resident interactions Resident to resident interactions
Interviews:	Residents Caregiver Three Medtechs Administrator Resident Care Coordinator Dining Director Resident Representatives
Record Reviews:	Sample resident care plan/face sheet/Medication Administration Record(January 2025-Current) Disclosure of Services Characteristic roster Staff roster Abuse/neglect reporting policy Facility medication Administration policy Nurse delegation facility incident timeline Nurse delegation policy

Investigation Summary:

1. Interview and record review showed facility did not have current Nurse Delegation oversight for resident medications requiring nurse delegation. Citation

WAC 388-78A-2320(3) Intermittent Nursing Service Systems,
2. Staff interviewed reported no concerns or directions given by administrative staff related to asking staff to falsify resident documentation. Staff stated they would notify the department if they were asked to falsify documents related to resident care, and were knowledgeable of abuse/neglect reporting process. Residents interviewed had no concerns with staff, felt safe, and can talk to staff about concerns. Record review showed resident care needs were reflected in negotiated service planning. Residents were observed without distress or unmet health needs, and staff were assisting residents during unannounced facility visit. No failed practice.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

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8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

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 02/27/2025 of:

Fields Senior Living at Spokane Valley
16512 E Desmet Court
Spokane Valley, WA 99016

This document references the following complaint number(s): 167251, 168318

The following sample was selected for review during the unannounced on-site visit: 8 of 69 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Anne Sinclair, NCI Community Complaint Investigator
Abigail Vanderkolk, Community Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit B
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

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.

J Salquist
Residential Care Services

03/13/2025
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.

Robyn A Hiett
Administrator (or Representative)

3.17.2025
Date

WAC 388-78A-2320 Intermittent nursing services systems.

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(b) Nurse delegation, if provided;

(3) The assisted living facility must ensure that all nursing services, including nursing supervision, assessments, and delegation, are provided in accordance with applicable statutes and rules, including, but not limited to:

(c) Chapter 246-840 WAC, Practical and registered nursing;

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to ensure that nurse delegated tasks were performed by qualified and trained staff for 3 of 3 staff (Staff C, D, E) which impacted 8 of 8 sampled residents (Residents 1, 2, 3, 4, 5, 6). This failure placed residents at risk for medication errors due to receiving care from untrained staff.

Findings included...

In interview on 02/27/2024 at 9:40AM, Staff A (Executive Director) stated that the facility currently had no nurse delegation oversight for staff related to resident medications requiring nurse delegation, and that staff had been continuing to administer medications requiring nurse delegation oversight to residents.

Review of a document, undated, showed that Staff B (Resident Care Coordinator) had discovered on 02/14/2025 that the facility did not have a current nurse delegator for the facility and had alerted Staff A.

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-2320 Intermittent nursing services systems.

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(3) The assisted living facility must ensure that all nursing services, including nursing supervision, assessments, and delegation, are provided in accordance with applicable statutes and rules, including, but not limited to:

(c) Chapter 246-840 WAC, Practical and registered nursing;

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to ensure that nurse delegated tasks were performed by qualified and trained staff for 3 of 3 staff (Staff C, D, E) which impacted 6 of 8 sampled residents (Residents 1, 2, 3, 4, 5, 6). This failure placed residents at risk for medication errors due to receiving care from untrained staff.

Findings included…

In interview on 02/27/2024 at 9:40AM, Staff A (Executive Director) stated that the facility currently had no nurse delegation oversight for staff related to resident medications requiring nurse delegation, and that staff had been continuing to administer medications requiring nurse delegation oversight to residents.

Review of a document, undated, showed that Staff B (Resident Care Coordinator) had discovered on 02/14/2025 that the facility did not have a current nurse delegator for the facility and had alerted Staff A.

In an interview on 02/27/2025 at 11:20AM, Staff D (Medication Tech), stated that since hire, they had not received training, or a competency check with a facility nurse delegator.

In an interview on 02/27/2025 at 11:30AM, Staff E (Medication Tech), stated that since hire, they had not received training, or a competency check with a facility nurse delegator.

In an interview on 02/27/2025 at 12:20PM, Staff C (Medication Tech), stated that since hire, they had not received training, or a competency check with a facility nurse delegator.

<Residents>

Review of Resident 1's Negotiated Service Agreement, dated 01/02/2024, showed that they had a diagnosis of [redacted] and required staff assistance with medication management and blood glucose checks.

Review of Resident 1's Medication Administration Records, dated 01/01/2025 to 02/27/2025, showed that facility staff documented as providing blood glucose testing (finger poke), a nurse delegated task, once daily for Resident 1.

In interview on 02/27/2025 at 12:34 PM, Resident 1 stated that they are not independent with medications, and that staff assist to poke their finger once daily for blood glucose testing.

Review of Resident 2's Negotiated Service Agreement, dated 11/25/2024, showed that they had a diagnosis of [redacted] and required staff assistance for medication management.

Review of Resident 2's Medication Administration Records, dated 01/01/2025 to 02/27/2025, showed that facility staff documented as providing blood glucose testing (finger poke), a nurse delegated task, once daily for Resident 2.

In interview on 02/27/2025 at 1:20 PM, Resident 2 stated they are not independent with medications, and that staff poke their finger once daily for blood glucose testing.

Review of Resident 3's Negotiated Service Agreement, dated 07/08/2024, showed that

they had a diagnosis of [redacted], and required assistance with Medication management.

Review of Resident 3's Medication administration records, dated 01/01/2025 to 02/27/2025, showed that facility staff documented instilling eye drops, a nurse delegated task, twice daily for Resident 1.

Review of Resident 4's Negotiated Service Agreement, dated 09/05/2025, showed that they had a diagnosis of [redacted], and required assistance with medication administration.

Review of Resident 4's Medication Administration Records, dated 01/01/2025 to 02/27/2025 showed that facility staff documented instilling eye drops, a nurse delegated task, twice daily for Resident 4.

Review of Resident 5's Negotiated Service Agreement, dated 07/08/2024, showed that they had a diagnosis of [redacted], and required Nurse delegation and assistance with medication administration.

Review of Resident 5's Medication Administration Records, dated 01/01/2025 to 2/27/2025, showed that facility staff documented applying prescribed crème once daily and prescribed gel twice daily, nurse delegated tasks, for Resident 5.

Review of Resident 6's Negotiated Service Agreement, dated 10/24/2024, showed that they had a diagnosis of [redacted], and required nurse delegation for medication management.

Review of Resident 6's Medication Administration Records, dated 01/01/2025 to 02/27/2025 showed that facility staff documented instillation of eye ointment and eye drops three times daily, and application of topical medication three times daily, nurse delegated tasks, for Resident 6.

In interview on 03/04/2025 at 11:55 AM, Staff A stated that the newly hired nurse delegator for the facility had been at the facility on 02/28/2025 and 03/03/2025 to establish current nurse delegation for staff at the facility.

Review of facility documents titled Nurse Delegation: Credentials and Training Verification, dated 02/28/2025 and 03/3/2025, showed that Nurse Delegation had been established at the facility for qualified staff beginning on 02/28/2025.

Statement of Deficiencies	License #: 2659	Compliance Determination # 55570
Plan of Correction	Fields Senior Living at Spokane Valley	Completion Date
Page 5 of 5	Licensee: Spokane Valley Seniors Housing, LLC	03/04/2025

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, Fields Senior Living at Spokane Valley is or will be in compliance with this law and / or regulation on (Date) 2.28.2025 .

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

Administrator (or Representative) — Date: 3.17.2025

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, Fields Senior Living at Spokane Valley 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