



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Ferndale AL, LLC
Avista Senior Living Ferndale
2240 Main St
Ferndale, WA 98248

RE: Avista Senior Living Ferndale License # 2677

Dear Administrator:

This letter addresses Compliance Determination(s) 65469 (Completion Date 09/12/2025) and 61470 (Completion Date 07/14/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/12/2025 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-2210-2

The Department staff who did the on-site verification:
Helen Fisher, Complaint Investigator

If you have any questions, please contact me at (253)312-1446.

Sincerely,

Jamie Singer, Field Manager
Region 2, Unit J
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: Avista Senior Living
Ferndale

License/Cert.#: 2677

Compliance Determination #: 61470

Investigator: Helen Fisher

Investigation Date(s): 06/25/2025 through 07/14/2025

Complainant Contact Date(s): 06/26/2025

Provider Type: Assisted Living Facility

Intake ID: 183087

Region/Unit #: RCS Region 2 / Unit A

Allegation(s):

- 1) The Named Residents (NR) did not receive the medications resulted in abdominal pain and constipation. The NR had to be treated with enema which caused more discomfort. The Assisted Living Facility (ALF) made several medication errors including medications were marked as "not in the building".
- 2) The ALF had no nurse oversight.

Investigation Methods:

Sample:	Total residents: 37 Resident sample size: 3 Closed records sample size: 0
Observations:	Residents. NR. Environment.
Interviews:	NR, Collateral Contacts, Executive Director, Nursing Staff.
Record Reviews:	NR's Care plan, medication administration records, hospice order, progress notes. Hospice notes.

Investigation Summary:

- 1) The NR stated that they were given enema due to abdominal pain from missing bowel medication dosages. The NR stated that the enema which also caused more discomfort. Review of the medication administration record dated June 2025 showed bowel medication was marked as "unable to locate" resulted in two missed dosages. Failed practice. A citation was written for noncompliance with WC 388-78A-2210 Medication services.
- 2) Interviews indicated that the ALF's nurse and the regional nurse were in the facility three days a week and covering twenty four hours/seven days a week calls. No failed practice was identified.

Conclusion / Action:

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



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Statement of Deficiencies	License #: 2677	Compliance Determination # 61470
Plan of Correction	Avista Senior Living Ferndale	Completion Date
Page 1 of 4	Licensee: Ferndale AL, LLC	07/14/2025

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 06/25/2025 of:

Avista Senior Living Ferndale
2240 Main St
Ferndale, WA 98248

This document references the following complaint number(s): 183087, 184246

The following sample was selected for review during the unannounced on-site visit: 3 of 37 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Helen Fisher, Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit Z
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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

Statement of Deficiencies	License #: 2677	Compliance Determination # 61470
Plan of Correction	Avista Senior Living Ferndale	Completion Date
Page 2 of 4	Licensee: Ferndale AL, LLC	07/14/2025

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.

Anthony Devito
Residential Care Services

7/16/2025
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.

Jamie Alvarez
Administrator (or Representative)

7/31/2025
Date

WAC 388-78A-2210 Medication services.

(2) The assisted living facility must ensure the following residents receive their medications as prescribed, except as provided for in WAC 388-78A-2230 and 388-78A-2250 :

This requirement was not met as evidenced by:

Based on interviews and record reviews, the Assisted Living Facility (ALF) failed to have systems in place that assured 1 of 3 sampled residents (Resident 1) received their prescribed medications as ordered. This failure resulted in Resident 1 not receiving two dosages of constipation medication as prescribed and placed them at risk for medical complications.

Findings included...

Resident 1

An undated face sheet showed Resident 1 was admitted to the ALF on [REDACTED] /2018 with multiple diagnoses including [REDACTED] and [REDACTED].

Review of Resident 1's negotiated service agreement dated 04/14/2025 showed

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

Resident 1 was to receive assistance with their medication.

Review of the electronic medication administration records (EMAR) for June 2025 showed Resident 1 was prescribed the following medication:

Lactulose Solution 10gm (gram) /15 ml (milliliter) take 30 ml (20 mg) by mouth twice a day for constipation (hold for loose stool). Start date was 06/09/2025.

The EMAR dated June 2025 showed Resident 1 did not receive 2 doses of Lactulose Solution on the following dates: June 10 & 11 at 4:00 PM. The EMAR showed "medication unable to locate" as the reason the medication was not given.

In an interview on 06/25/2025 at 10:35 AM, Staff A, Executive Director, stated that Staff C (Med Tech) did not find Resident 1's medication in the cart. Staff A stated that instead of looking for the medication further Staff C marked the medication as unable to locate.

In an interview on 06/25/2025 at 11:30 AM, Resident 1 stated that when they missed their medication for their constipation, they did not defecate and had abdominal pain. Resident 1 stated that they had to be given an enema (a procedure where medication is administered rectally). Resident 1 stated that the enema procedure was also uncomfortable.

In an interview on 06/25/2026 at 11:46 AM, Staff B, Health Services Coordinator, stated that they provided all the med techs including Staff C, training on ordering and safe medication delivery almost every month. Staff B stated that the packaging of Resident 1 medication changed which made Staff C lose their focus.

In an interview on 06/26/2025 at 8:47 AM, Collateral Contact (CC) stated that the hospice nurse had to administer enema to Resident 1 for severe abdominal pain due to constipation.

Review of the hospice notes dated 10/13/2025 showed that Resident 1 requested and received an enema on 06/13/2025 due to inability to sleep a night before related to abdominal discomfort for missing medication for constipation on June 10 and 11. The hospice nurse requested the ALF to follow Resident 1 bowel regimen.

In an interview on 07/10/1025 at 3:40 PM, Staff C, Medication Technician, stated that Resident 1's Lactulose Solution was ordered on 06/09/2024 and did not know that the medication was delivered the morning of 06/10/2025. Staff C stated that they did not find the medication for two days on June 10th and 11th to give to Resident 1. Staff C stated they charted as medication was unable to locate. Staff C stated that they were looking for a bigger bottle unaware that the pharmacy sent the medication in a different packaging.

Statement of Deficiencies

License #: 2677

Compliance Determination # 61470

Plan of Correction

Avista Senior Living Ferndale

Completion Date

Page 4 of 4

Licensee: Ferndale AL, LLC

07/14/2025

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, Avista Senior Living Ferndale is or will be in compliance with this law and / or regulation on (Date) 8/1/2025

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

Administrator (or Representative)



Date

7/31/2025