STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

Ellensburg AL, LLC
Avista Senior Living Ellensburg
1008 East Mountain View Ave
Ellensburg, WA 98926

RE: Avista Senior Living Ellensburg License # 2683

Dear Administrator:

This letter addresses Compliance Determination(s) 77724 (Completion Date 05/20/2026) and 75037 (Completion Date 04/02/2026).

The Department completed a follow-up inspection of your Assisted Living Facility on 05/20/2026 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-2468-1, WAC 388-78A-24681-1, WAC 388-78A-24681-2, WAC 388-78A-24681, WAC 388-78A-2480-1, WAC 388-78A-2466-1-a, WAC 388-78A-3090-2-c-iv

The Department staff who did the on-site verification:
Tracy Ramirez, 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

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

Statement of Deficiencies	License #: 2683	Compliance Determination # 75037
Plan of Correction	Avista Senior Living Ellensburg	Completion Date
Page 1 of 7	Licensee: Ellensburg AL, LLC	04/02/2026

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 the unannounced on-site full inspection on 03/30/2026, 03/31/2026, 04/01/2026 and 04/02/2026 of:
Avista Senior Living Ellensburg
1008 East Mountain View Ave
Ellensburg, WA 98926

The following sample was selected for review during the unannounced on-site visit: 5 of 30 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Anna Cairns, ALF Long Term Care Surveyor
Tracy Ramirez, Assisted Living Facility Licensor

From:
DSHS, Home and Community Living Administration
Residential Care Services, Region 1 , Unit G
1200 Alder Street
Union Gap, WA 98903

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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.

Laura Williams-Davis
Residential Care Services

04/10/2026
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.

Arlene Walton (ED)
Administrator (or Representative)

4-13-26
Date

WAC 388-78A-2468 Background checks Employment Conditional hire Pending results of Washington state name and date of birth background check. The assisted living facility may conditionally hire an administrator, caregiver, or staff person directly or by contract, pending the result of the Washington state name and date of birth background check, provided that the assisted living facility:

(1) Submits the background authorization form for the person to the department no later than one business day after he or she starts working;

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility failed to submit a Washington state name and date of birth background check within one business day of staff working for 1 of 3 staff (Staff D). This failure placed residents at risk of being cared for by disqualified staff.

Findings included...

Review of personnel file for Staff D, Caregiver, showed that they started working at the facility on 05/04/2025. Staff D's file showed their Washington state name and date of birth background check was conducted on 06/12/2025, 39 days after their hire date.

On 03/31/2026 at 11:00 AM, Staff A, Administrator, acknowledged that Staff D, Caregiver, acknowledged that Staff D's Washington state name and date of birth background check was completed late.

Statement of Deficiencies	License #: 2683	Compliance Determination # 75097
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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 Ellensburg is or will be in compliance with this law and / or regulation on (Date) 5-15-26

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

Administrator (or Representative) Catherine Walther (ED) Date 4-13-24

WAC 388-78A-24681 Background checks Employment Provisional hire Pending results of national fingerprint background check. The assisted living facility may provisionally employ a caregiver and an administrator hired after January 7, 2012 for one hundred and twenty-days and allow the caregiver or administrator to have unsupervised access to residents when:

(1) The caregiver or administrator is not disqualified based on the results of the Washington state name and date of birth background check; and

(2) The results of the national fingerprint background check are pending.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility failed to ensure that a fingerprint background check was completed by one hundred and twenty days for 1 of 3 staff (Staff B). This failed practice placed residents at risk of receiving care by an unqualified caregiver.

Findings included...

Review of personnel file for Staff B, Registered Nurse, showed that they started working at the facility on 06/27/2025. Staff B's file showed they had no fingerprint background check on 03/31/2025, 277 days after their hire date.

On 03/31/2026 at 10:24 AM, Staff A, Administrator, stated that Staff B had a fingerprint background check appointment on 03/26/2026. Staff A acknowledged that Staff B did not have a fingerprint background check result for the facility to review and Staff B had unsupervised access to residents.

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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 Ellensburg is or will be in compliance with this law and / or regulation on (Date) 5-15-24

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

Administrator (or Representative) [signature] Date 4-13-24

WAC 388-78A-2480 Tuberculosis Testing Required.

(1) The assisted living facility must develop and implement a system to ensure each staff person is screened for tuberculosis within three days of employment.

This requirement was not met as evidenced by:

Based on interviews and record review, the Assisted Living Facility failed to ensure screening for tuberculosis was completed within three days of hire for 4 of 4 Staff (Staff A, B, C and D). This failed practice placed residents at risk of potential exposure to a communicable disease.

Findings included...

Review of personnel file for Staff A, Administrator, showed that they started working at the facility on 09/10/2020. Staff A's file showed their initial Tuberculosis (TB) screening was conducted on 09/16/2020, 6 days after their hire date.

Review of personnel file for Staff B, Registered Nurse, showed that they started working at the facility on 06/27/2025. Staff B's file showed their initial TB screening was conducted on 08/26/2025, 60 days after their hire date.

Review of personnel file for Staff C, Health Services Director, showed that they started working at the facility on 03/21/2025. Staff C's file showed their initial TB screening was conducted on 04/11/2025, 21 days after their hire date.

Review of personnel file for Staff D, Caregiver, showed that they started working at the facility on 05/04/2025. Staff D's file showed their initial TB screening was conducted on 08/22/2025, 110 days after their hire date.

On 03/31/2026 at 11:02 AM, Staff A, Administrator, acknowledged that Staff A, Staff B, Staff C, and Staff D's TB screenings were late.

This is a recurring deficiency previously cited on 05/02/2024.

Plan/Attestation Statement

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

[signature] (ED) — 4-13-26

Administrator (or Representative) — Date

WAC 388-78A-2466 Background checks Washington state name and date of birth background check Valid for two years National fingerprint background check Valid indefinitely.

(1) A Washington state name and date of birth background check is valid for two years from the initial date it is conducted. The assisted living facility must ensure:

(a) A new DSHS background authorization form is submitted to the department's background check central unit every two years for all administrators, caregivers, staff persons, volunteers and students; and

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility failed to ensure that staff that had a valid Washington state name and date of birth background check completed every two years for 1 of 3 staff (Staff A). This failure placed residents at risk of being cared for by potentially disqualified staff.

Findings included...

Review of personnel file for Staff A, Administrator, showed that they started working at the facility on 09/10/2020. Staff A's file showed that they had a two-year Washington state name and date of birth background check on 04/28/2023 that had expired on 04/28/2025. Staff A's file showed that their next two-year Washington state name and date of birth background check was on 11/09/2025, 195 days after their previous one had expired.

In an interview on 03/31/2026 at 3:05 PM, Staff A, acknowledged that their personnel file showed that their two-year background check was late and was unsure of the reason.

This is a reoccurring deficiency previous cited on 05/02/2024.

Plan/Attestation Statement

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

Arthur Walton (EVP) — Administrator (or Representative)

4-13-26 — Date

WAC 388-78A-3090 Maintenance and housekeeping.

(2) The assisted living facility must provide housekeeping supply room(s):

(c) Equipped with:

(iv) Mechanical ventilation to the outside of the assisted living facility.

This requirement was not met as evidenced by:

Based on observations and interviews, the Assisted Living Facility failed to ensure that housekeeping chemicals were kept in a room that had mechanical ventilation to the outside of the facility for 2 of 2 chemical storage rooms (1 and 2). This failure placed residents at risk of health issues from potential exposure to chemicals.

Findings included...

Observation on 03/30/2026 at 11:44 AM, showed that the chemical storage room, next to the laundry room, had the facility's housekeeping chemicals stored there. Additionally, observation of the chemical storage room showed that there were no audible or visible indications of the vent working.

In an interview on 03/30/2026 at 11:45 AM, Staff H, Maintenance Director, acknowledged that there was no mechanical ventilation in the chemical storage room.

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Observation on 04/01/2026 at 10:30 AM, showed cleaning chemicals stored in a locked chemical storage room in the kitchen. Additionally, observation of the storage room showed that there was a non-working vent in the ceiling.

In an interview on 04/01/2026, Staff I, Dietary Manager, stated that the vent in the kitchen chemical storage room that contained cleaning chemicals, did not function.

This is a reoccurring deficiency previous cited on 05/02/2024.

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

Administrator (or Representative) — Date: 4-13-26