STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

04/09/2026

Spokane Valley AL, LLC
Trustwell Living at Ridgeview Place
12903 E Mission Ave
Spokane Valley, WA 99216

RE: Trustwell Living at Ridgeview Place # 2730

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 75650 (Completion Date 04/09/2026) and 72666 (Completion Date 02/09/2026).

The Department completed a follow-up inspection of your Assisted Living Facility on 04/09/2026 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

RCW 70.129.140 Quality of life -- Rights.

(1) The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality.

WAC 388-78A-2660 Resident rights. The assisted living facility must:

(1) Comply with chapter 70.129 RCW, Long-term care resident rights;

WAC 388-78A-2474 Training and home care aide certification requirements.

(1) The assisted living facility must ensure staff persons hired before January 7, 2012 meet training requirements in effect on the date hired, including requirements in chapter 388-112A WAC.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(a) Orientation and safety;

(d) Cardiopulmonary resuscitation and first aid; and

(e) Continuing education.

WAC 388-78A-2690 Electronic monitoring equipment Resident requested use.

(1) Audio or video monitoring equipment may not be installed in the assisted living facility to monitor any resident apartment or sleeping area unless the resident or the residents' representative has requested and consents to the monitoring.

(7) The assisted living facility must:

(a) Reevaluate the need for the electronic monitoring with the resident at least quarterly; and

(b) Have each reevaluation in writing, signed and dated by the resident.

The Department staff who did the On Site verification:
Patricia Eddy, Community Licensor

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

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

HOME AND COMMUNITY LIVING ADMINISTRATION

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 the unannounced on-site full inspection on 02/04/2026, 02/05/2026, 02/06/2026 and 02/09/2026 of:

Trustwell Living at Ridgeview Place
12903 E Mission Ave
Spokane Valley, WA 99216

The following sample was selected for review during the unannounced on-site visit: 7 of 48 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Jennifer Lee, Assisted Living Facility Licensor
Brian Zbylski, ALF Licensor

From:
DSHS, Home and Community Living 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.

Residential Care Services — 02/17/2026 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.

Administrator (or Representative) — 2/17/26 Date

RCW 70.129.140 Quality of life -- Rights.

(1) The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality.

WAC 388-78A-2660 Resident rights. The assisted living facility must:

(1) Comply with chapter 70.129 RCW, Long-term care resident rights: EC - 3/24/26

This requirement was not met as evidenced by:

Based on observation, interview and record review, the facility failed to provide meal service that enhanced residents' dignity and respect for 3 of 4 residents (Resident 8, 9, and 10) reviewed for meal service. This failure resulted in extended wait times for meal service and placed the residents at risk of a decreased quality of life.

Findings included...

In an interview on 02/04/2026 at 1:00 PM, Staff A, Executive Director, stated that facility mealtimes were scheduled daily at 8:00 AM, 12:00 PM, and 5:00 PM.

In an interview on 02/05/2026 at 11:40 AM, Resident 8 stated that they usually had to wait between 15-20 minutes for the meals to be served.

Observation on 02/05/2026 at 12:02 PM showed multiple residents seated in the dining room. Further observation showed the first plates of food for residents were brought to the residents' tables at 12:23 PM.

Observation on 02/06/2026 at 8:34 AM showed residents in the dining room being

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

RCW 70.129.140 Quality of life -- Rights.

(1) The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality.

WAC 388-78A-2660 Resident rights. The assisted living facility must:

(1) Comply with chapter 70.129 RCW, Long-term care resident rights;

This requirement was not met as evidenced by:

Based on observation, interview and record review, the facility failed to provide meal service that enhanced residents' dignity and respect for 3 of 4 residents (Resident 8, 9, and 10) reviewed for meal service. This failure resulted in extended wait times for meal service and placed the residents at risk of a decreased quality of life.

Findings included…

In an interview on 02/04/2026 at 1:00 PM, Staff A, Executive Director, stated that facility mealtimes were scheduled daily at 8:00 AM, 12:00 PM, and 5:00 PM.

In an interview on 02/05/2026 at 11:40 AM, Resident 8 stated that they usually had to wait between 15-20 minutes for the meals to be served.

Observation on 02/05/2026 at 12:02 PM showed multiple residents seated in the dining room. Further observation showed the first plates of food for residents were brought to the residents' tables at 12:23 PM.

Observation on 02/06/2026 at 8:34 AM showed residents in the dining room being

served oatmeal. Further observation showed the breakfast entrée was served at 8:38 AM.

Observation on 02/06/2026 at 12:30 PM showed staff began to serve lunch to residents in the dining room.

Observation on 02/06/2026 at 12:37 PM showed staff began to serve memory care residents their lunch with the last meal being served at 12:45 PM.

In an interview on 02/06/2026 at 4:14 PM, Staff A confirmed that mealtimes were 8:00 AM, 12:00 PM and 5:00 PM.

Observation on 02/09/2026 at 8:14 AM showed staff began to serve bowls of oatmeal to residents in the dining room. Observation at 8:19 AM showed staff began to serve breakfast entrees to residents.

In an interview on 02/09/2026 at 9:43 AM, Resident 10 stated that residents usually had to wait about 15 minutes before meals were served in the dining room.

In an interview on 02/09/2026 at 2:10 PM, Resident 9 stated that meals had been about 30 minutes late the past weekend and that breakfast, lunch, and dinner meals were often late.

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, Trustwell Living at Ridgeview Place is or will be in compliance with this law and / or regulation on (Date) 3/26/26 .

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

Ellen Berndallen — Administrator (or Representative)

2/17/26 — Date

WAC 388-78A-2474 Training and home care aide certification requirements. EB - 3/26/26

(1) The assisted living facility must ensure staff persons hired before January 7, 2012 meet training requirements in effect on the date hired, including requirements in chapter 388-112A WAC.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(a) Orientation and safety;

served oatmeal. Further observation showed the breakfast entrée was served at 8:38 AM.

Observation on 02/06/2026 at 12:30 PM showed staff began to serve lunch to residents in the dining room.

Observation on 02/06/2026 at 12:37 PM showed staff began to serve memory care residents their lunch with the last meal being served at 12:45 PM.

In an interview on 02/06/2026 at 4:14 PM, Staff A confirmed that mealtimes were 8:00 AM, 12:00 PM and 5:00 PM.

Observation on 02/09/2026 at 8:14 AM showed staff began to serve bowls of oatmeal to residents in the dining room. Observation at 8:19 AM showed staff began to serve breakfast entrees to residents.

In an interview on 02/09/2026 at 9:43 AM, Resident 10 stated that residents usually had to wait about 15 minutes before meals were served in the dining room.

In an interview on 02/09/2026 at 2:10 PM, Resident 9 stated that meals had been about 30 minutes late the past weekend and that breakfast, lunch, and dinner meals were often late.

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, Trustwell Living at Ridgeview Place 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

WAC 388-78A-2474 Training and home care aide certification requirements.

(1) The assisted living facility must ensure staff persons hired before January 7, 2012 meet training requirements in effect on the date hired, including requirements in chapter 388-112A WAC.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(a) Orientation and safety;

(d) Cardiopulmonary resuscitation and first aid; and

(e) Continuing education.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to ensure orientation and safety training was completed by 1 of 5 staff (Staff C), cardiopulmonary resuscitation and first aid was completed by 1 of 5 staff (Staff D), and continuing education was completed by 2 of 5 staff (Staff D and F). This failure placed the residents at risk of receiving care from untrained staff and staff that had not completed the required education hours for ongoing professional development.

Findings included...

Per WACs 388-112A-0200 and 388-112A-0220 Long-term care workers must complete orientation and safety training prior to providing care to a resident. EB - 3/26/26

Per WAC 388-112A-0720 Assisted living facility long-term care workers must maintain a valid Cardiopulmonary Resuscitation (CPR) and first-aid card. EB - 3/26/26

Per WAC 388-112A-0611 Long-term care workers must complete 12 hours of continuing education by their birthday each year. EB - 3/26/26

<Orientation and Safety>

Review of Staff C's, Resident Care Assistant, personnel file showed a hire date of 12/27/2024. Further review showed training for orientation and safety had been completed on 02/05/2026, 405 days after their date of hire.

Review of the facility's staff schedule dated 01/18/2026-02/03/2026 showed that Staff C had worked and provided resident care on 11 different days.

In an interview on 02/09/2026 at 1:04 PM, Staff A, Executive Director, confirmed that Staff C was still employed as a resident care assistant. Staff A further stated that Staff C had not completed their safety and orientation prior to 02/05/2026.

<Cardiopulmonary Resuscitation/First Aid>

Review of Staff D's, Resident Care Assistant, personnel file showed a hire date of 06/07/2024. Further review showed Staff D's training for CPR and first aid expired on 11/14/2025.

Review of the facility's staff schedule dated 01/18/2026 -02/03/2026 showed that Staff D had worked and provided resident care on 11 different days.

In an interview on 02/09/2026 at 1:04 PM, Staff A stated that they were not aware that Staff D's CPR/first aid had expired.

(d) Cardiopulmonary resuscitation and first aid; and

(e) Continuing education.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to ensure orientation and safety training was completed by 1 of 5 staff (Staff C), cardiopulmonary resuscitation and first aid was completed by 1 of 5 staff (Staff D), and continuing education was completed by 2 of 5 staff (Staff D and F). This failure placed the residents at risk of receiving care from untrained staff and staff that had not completed the required education hours for ongoing professional development.

Findings included...

Per WACs 388-112A-0200 and 388-112A-0220 Long-term care workers must complete orientation and safety training prior to providing care to a resident.

Per WAC 388-112A-0720 Assisted living facility long-term care workers must maintain a valid Cardiopulmonary Resuscitation (CPR) and first-aid card.

Per WAC 388-112A-0611 Long-term care workers must complete 12 hours of continuing education by their birthday each year.

<Orientation and Safety>

Review of Staff C's, Resident Care Assistant, personnel file showed a hire date of 12/27/2024. Further review showed training for orientation and safety had been completed on 02/05/2026, 405 days after their date of hire.

Review of the facility's staff schedule dated 01/18/2026-02/03/2026 showed that Staff C had worked and provided resident care on 11 different days.

In an interview on 02/09/2026 at 1:04 PM, Staff A, Executive Director, confirmed that Staff C was still employed as a resident care assistant. Staff A further stated that Staff C had not completed their safety and orientation prior to 02/05/2026.

<Cardiopulmonary Resuscitation/First Aid>

Review of Staff D's, Resident Care Assistant, personnel file showed a hire date of 06/07/2024. Further review showed Staff D's training for CPR and first aid expired on 11/14/2025.

Review of the facility's staff schedule dated 01/18/2026 -02/03/2026 showed that Staff D had worked and provided resident care on 11 different days.

In an interview on 02/09/2026 at 1:04 PM, Staff A stated that they were not aware that Staff D's CPR/first aid had expired.

Statement of Deficiencies	License #: 2730	Compliance Determination # 72666
Plan of Correction	Trustwell Living at Ridgeview Place	Completion Date
Page 5 of 6	Licensee: Spokane Valley AL, LLC	02/09/2026

<Continuing Education>

Review of Staff D's personnel file showed a hire date of 12/27/2024 as a certified nursing assistant. Further review showed that Staff D did not have any Continuing Education (CE) credits for the requested period of 05/15/2024-05/15/2025.

Review of the facility's staff schedule dated 01/18/2026 -02/03/2026 showed that Staff D had worked and provided resident care on 11 different days.

Review of Staff F's, Resident Care Assistant, personnel file showed a hire date of 02/05/2023 as a home care aide. Further review showed that Staff F had completed 6.75 CE hours for the requested period of 02/20/2024-02/20/2025.

Review of the facility's staff schedule dated 01/18/2026 -02/03/2026 showed that Staff F had worked and provided resident care on 14 different days.

In an interview on 02/09/2026 at 1:04 PM, Staff A stated they did not have documentation of CE hours for Staff D, and did not have more than 6.75 hours of continuing education documented for Staff F.

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, Trustwell Living at Ridgeview Place is or will be in compliance with this law and / or regulation on (Date) 3/26/26.

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

Ellyn Bourdeau — Administrator (or Representative)

2/17/26 — Date

WAC 388-78A-2690 Electronic monitoring equipment Resident requested use. EB -3 26/26

(1) Audio or video monitoring equipment may not be installed in the assisted living facility to monitor any resident apartment or sleeping area unless the resident or the residents' representative has requested and consents to the monitoring.

(7) The assisted living facility must:

(a) Reevaluate the need for the electronic monitoring with the resident at least quarterly; and

(b) Have each reevaluation in writing, signed and dated by the resident.

<Continuing Education>

Review of Staff D's personnel file showed a hire date of 12/27/2024 as a certified nursing assistant. Further review showed that Staff D did not have any Continuing Education (CE) credits for the requested period of 05/15/2024-05/15/2025.

Review of the facility's staff schedule dated 01/18/2026 -02/03/2026 showed that Staff D had worked and provided resident care on 11 different days.

Review of Staff F's, Resident Care Assistant, personnel file showed a hire date of 02/05/2023 as a home care aide. Further review showed that Staff F had completed 6.75 CE hours for the requested period of 02/20/2024-02/20/2025.

Review of the facility's staff schedule dated 01/18/2026 -02/03/2026 showed that Staff F had worked and provided resident care on 14 different days.

In an interview on 02/09/2026 at 1:04 PM, Staff A stated they did not have documentation of CE hours for Staff D, and did not have more than 6.75 hours of continuing education documented for Staff F.

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, Trustwell Living at Ridgeview Place 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

WAC 388-78A-2690 Electronic monitoring equipment Resident requested use.

(1) Audio or video monitoring equipment may not be installed in the assisted living facility to monitor any resident apartment or sleeping area unless the resident or the residents' representative has requested and consents to the monitoring.

(7) The assisted living facility must:

(a) Reevaluate the need for the electronic monitoring with the resident at least quarterly; and

(b) Have each reevaluation in writing, signed and dated by the resident.

This requirement was not met as evidenced by:

Based on observation and interview, the facility failed to obtain written consent from 2 of 2 residents (Residents 1 and 3) who had video monitoring in their private rooms. This failure resulted in the residents not being afforded the opportunity to provide consent or decline video monitoring.

Findings included...

Observation on 02/04/2026 at 1:30 PM showed posted signs that stated video recording was in progress inside the private rooms of Resident 1 and Resident 3.

Observation on 02/05/2026 at 3:15 PM, showed a video camera placed next to Resident 1's television and directed toward the room. In an interview at that time, the resident stated that their child had access to the video and could see everything in the room.

Observation on 02/06/2026 at 11:48 AM, showed a video camera placed on Resident 3's table and directed toward the room. In an interview at that time, the resident stated that they were not sure if they had a video camera but did know that there was a sign outside the door saying there was a camera in the room.

In an interview on 02/06/2026 at 4:15 PM, Staff A, Executive Director, stated that staff reported an electronic monitor in Resident 3's room and placed a sign next to the door.

In an interview on 02/09/2026 at 10:55 AM, Staff A stated that they had video recording signs posted outside of Resident 1 and 3's rooms but were unaware of the requirement to have residents sign consent forms.

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, Trustwell Living at Ridgeview Place is or will be in compliance with this law and / or regulation on (Date) 3/6/26 .

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

Ellyn Bandolier — Administrator (or Representative)

2/17/26 — Date

This requirement was not met as evidenced by:

Based on observation and interview, the facility failed to obtain written consent from 2 of 2 residents (Residents 1 and 3) who had video monitoring in their private rooms. This failure resulted in the residents not being afforded the opportunity to provide consent or decline video monitoring.

Findings included…

Observation on 02/04/2026 at 1:30 PM showed posted signs that stated video recording was in progress inside the private rooms of Resident 1 and Resident 3.

Observation on 02/05/2026 at 3:15 PM, showed a video camera placed next to Resident 1's television and directed toward the room. In an interview at that time, the resident stated that their child had access to the video and could see everything in the room.

Observation on 02/06/2026 at 11:48 AM, showed a video camera placed on Resident 3's table and directed toward the room. In an interview at that time, the resident stated that they were not sure if they had a video camera but did know that there was a sign outside the door saying there was a camera in the room.

In an interview on 02/06/2026 at 4:15 PM, Staff A, Executive Director, stated that staff reported an electronic monitor in Resident 3's room and placed a sign next to the door.

In an interview on 02/09/2026 at 10:55 AM, Staff A stated that they had video recording signs posted outside of Resident 1 and 3's rooms but were unaware of the requirement to have residents sign consent forms.

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, Trustwell Living at Ridgeview Place 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