



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave Ste 200, Vancouver, WA 98684

CHEHALIS WEST RETIREMENT CENTER INC
CHEHALIS WEST RETIREMENT CENTER INC
478 NW QUINCY PLACE
Chehalis, WA 98532

RE: CHEHALIS WEST RETIREMENT CENTER INC License # 783

Dear Administrator:

This letter addresses Compliance Determination(s) 70496 (Completion Date 12/22/2025) and 64628 (Completion Date 08/25/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 12/22/2025 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-2040-2

The Department staff who did the on-site verification:
Maria Salas, ALF Complaint Investigator

If you have any questions, please contact me at (360)450-1218.

Sincerely,

Clinton Fridley RN

Clinton Fridley, Community Nurse Field Manager
Region 3, Unit E
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: CHEHALIS WEST
RETIREMENT CENTER INC
License/Cert.#: 783

Provider Type: Assisted Living Facility

Compliance Determination #: 64628

Intake ID: 190638

Investigator: Maria Salas

Region/Unit #: RCS Region 3 / Unit E

Investigation Date(s): 08/25/2025 through 08/25/2025

Complainant Contact Date(s):

Allegation(s):

Report of failed Fire Marshal inspections x4.

Investigation Methods:

Sample: Total residents: 54
Resident sample size: 0
Closed records sample size: 0

Observations: Residents

Interviews: Identified staff

Record Reviews: Medical records
Maintenance logs

Investigation Summary:

Based on record review and interview the facility failed annual fire marshal inspection four times. Failed practice identified.

Conclusion / Action:

- ☒ 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 #: 783	Compliance Determination # 64628
Plan of Correction	CHEHALIS WEST RETIREMENT CENTER INC	Completion Date
Page 1 of 3	Licensee: CHEHALIS WEST RETIREMENT CENTER INC	08/25/2025

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 08/25/2025 of:

CHEHALIS WEST RETIREMENT CENTER INC
478 NW QUINCY PLACE
CHEHALIS, WA 98532

This document references the following complaint number(s): 190638

The following sample was selected for review during the unannounced on-site visit: 0 of 54 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Maria Salas, ALF Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit E
800 NE 136th Ave Ste 200
Vancouver, WA 98684

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Statement of Deficiencies	License #: 783	Compliance Determination # 64628
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Page 2 of 3	Licensee: CHEHALIS WEST RETIREMENT CENTER INC	08/25/2025

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.

Clinton Fridley
Residential Care Services

09/04/2025

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.

[Signature]

Administrator (or Representative)

9/5/2025

Date

WAC 388-78A-2040 Other requirements.

[Signature]

9/5/25

(2) The assisted living facility must have its building approved by the Washington state fire marshal in order to be licensed.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to stay in compliance with the local and state fire ordinances for 1 of 1 Assisted Living Facilities (ALF). This failure placed all residents, visitors, and staff at risk of injury and harm in the event of a fire.

Findings included...

Review of the Washington State Fire Marshal's letter of Non-compliance, dated 08/07/2025, showed the facility had failed to gain and maintain compliance as required by state law, findings below:
Inspection and Maintenance: "The facility failed to provide an annual fire door inspection that included the inspection of fire door gaps."

Review of the Washington State Fire Marshal's letter of Non-compliance, dated 06/24/2025, showed the facility had failed to gain and maintain compliance as required by state law, findings below:
Inspection and Maintenance: "The facility failed to provide an annual fire door inspection that included the inspection of fire door gaps."

Review of the Washington State Fire Marshal's letter of Non-compliance, dated 03/20/2025, showed the facility had failed to gain and maintain compliance as required by state law, findings below:

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Statement of Deficiencies	License #: 783	Compliance Determination # 64828
Plan of Correction	CHEHALIS WEST RETIREMENT CENTER INC	Completion Date
Page 3 of 3	Licensee: CHEHALIS WEST RETIREMENT CENTER INC	08/25/2025

Inspection and Maintenance: "The facility failed to provide an annual fire door inspection that included the inspection of fire door gaps."

Review of Hi-Tech Systems Fire Door Inspection Report, dated 01/21/2025, showed facility failed inspection.

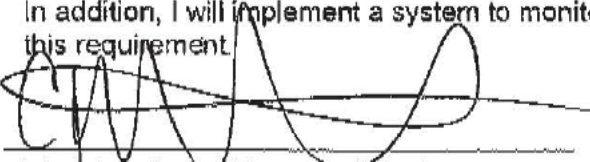
Review of the Washington State Fire Marshal's letter of Non-compliance, dated 01/16/2025, showed the facility had failed to gain and maintain compliance as required by state law, findings below:
Inspection and Maintenance: "The facility failed to provide an annual fire door inspection that included the inspection of fire door gaps."

In an interview on 08/25/2025, Staff A, Executive Director (ED), stated that their original inspection failure was due to not having an annual fire door inspection completed. Staff A stated they then completed an inspection on 01/21/2025 and had multiple fire doors fail the inspection. Staff A stated they had been working with an outside company to complete all required maintenance.

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, CHEHALIS WEST RETIREMENT CENTER INC is or will be in compliance with this law and / or regulation on (Date) 8/26/2025.

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



Administrator (or Representative)

9/5/25

Date