



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
AGING AND LONG-TERM SUPPORT ADMINISTRATION  
**3906-172nd St NE, Suite #100, Arlington, WA 98223**

TULALIP TRIBES  
TULALIP TRIBES BOARDING HOME  
7300 Totem Beach Rd  
Tulalip, WA 98271

RE: TULALIP TRIBES BOARDING HOME License # 956

Dear Administrator:

This letter addresses Compliance Determination(s) 51798 (Completion Date 12/16/2024) and 46795 (Completion Date 09/10/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 12/16/2024 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:  
Syng To, ALF Complaint Investigator

If you have any questions, please contact me at (360)651-6846.

Sincerely,

Kimberley Ripley, Field Manager  
Region 2, Unit A  
Residential Care Services



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|                           |                              |                                  |
|---------------------------|------------------------------|----------------------------------|
| Statement of Deficiencies | License #: 956               | Compliance Determination # 46795 |
| Plan of Correction        | TULALIP TRIBES BOARDING HOME | Completion Date                  |
| Page 1 of 3               | Licensee: TULALIP TRIBES     | 09/10/2024                       |

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 follow-up on 09/05/2024 and 09/05/2024 of:

TULALIP TRIBES BOARDING HOME  
7300 Totem Beach Rd  
Tulalip, WA 98271

This document references the following SOD dated: 09/10/2024

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

The department staff that inspected the Assisted Living Facility:

Syng To, ALF Complaint Investigator

From:  
DSHS, Aging and Long-Term Support Administration  
Residential Care Services, Region 2 , Unit A  
3906-172nd St NE, Suite #100  
Arlington, WA 98223

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.

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

\_\_\_\_\_  
Administrator (or Representative)

\_\_\_\_\_  
Date

**WAC 388-78A-2040 Other requirements.**

(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 interviews and record reviews, the Assisted Living Facility (ALF) failed to maintain compliance with the Washington State Patrol Fire Protection Bureau when the ALF failed 2 of 2 Fire and Life Safety annual inspections (05/14/2024 and 06/24/2024). This failure placed all residents at risk of harm in the event of a fire.

**Findings included...**

Review of the Department of Social and Health Services' (DSHS) Secure Tracking and Reporting System (STARS) showed that on 07/10/2024 the ALF received an initial citation for this regulation. The ALF signed an attestation statement that showed the ALF would have the deficiency corrected by 08/24/2024.

Review of the Washington State Patrol Fire Protection Bureau report dated 05/14/2024 showed the ALF had failed to comply with International Fire Code (IFC) for six items. During the Fire Marshal's second visit on 06/24/2024, the following two items had not been corrected:

IFC 903.5.2021 Testing and Maintenance. The facility was unable to provide documentation for the annual sprinkler system inspection.

IFC 907.8.2021 Inspection, Testing and Maintenance. The facility was unable to provide documentation for the annual fire alarm system testing.

On 09/05/2024 10:50 AM, Staff B, Director of Facilities, stated that the deficiencies were corrected and documentation was sent to the Washington State Patrol Fire Marshal.

On 09/05/2024 02:38 PM, Staff B, Director of Facilities, stated that they completed the "spare sprinkler equivalent replacement deficiency" leaving only a vendor to work on

the information placards (displays the amount of water pressure coming through the hose) to be completed. They are actively working on it.

On 09/09/2024 06:04 PM, Collateral contact (CC), Fire Marshal, stated that the ALF's Report of Inspection/Test dated 04/30/2024 showed the ALF still has deficiencies noted. CC stated, "I can't accept the report until I received documentation that the deficiencies noted have been corrected."

On 09/10/2024 12:19 PM, CC stated that the ALF remained out of compliance for IFC 903.5.2021 Testing and Maintenance.

On 09/12/2024 at 11:19 AM Staff B stated they were still working to get the placards fixed.

This is an uncorrected deficiency previously cited on 07/10/2024.

**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, TULALIP TRIBES BOARDING HOME 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



## Residential Care Services Investigation Summary Report

**Provider/Facility:** TULALIP TRIBES  
BOARDING HOME

**License/Cert.#:** 956

**Compliance Determination #:** 43788

**Investigator:** Nicholette Flynn

**Investigation Date(s):** 07/08/2024 through 07/10/2024

**Complainant Contact Date(s):**

**Provider Type:** Assisted Living Facility

**Intake ID:** 136149

**Region/Unit #:** RCS Region 2 / Unit A

### Allegation(s):

The Assisted Living Facility (ALF) failed their 2nd fire and life safety inspection.

### Investigation Methods:

|                        |                                                                                |
|------------------------|--------------------------------------------------------------------------------|
| <b>Sample:</b>         | Total residents: 0<br>Resident sample size: 0<br>Closed records sample size: 0 |
| <b>Observations:</b>   | Facility                                                                       |
| <b>Interviews:</b>     | Administration<br>State Patrol Fire Marshal                                    |
| <b>Record Reviews:</b> | Facility records<br>State Patrol Fire Marshal records                          |

### Investigation Summary:

Based on interviews and record reviews, the (ALF) failed to ensure the violation for 2 Fire and Life Safety annual inspections was corrected. A citation was written for noncompliance with WAC 388-78A-2040 (2) Other requirements.

### 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 #: 956               | Compliance Determination # 43788 |
| Plan of Correction        | TULALIP TRIBES BOARDING HOME | Completion Date                  |
| Page 1 of 3               | Licensee: TULALIP TRIBES     | 07/10/2024                       |

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 07/08/2024, 07/08/2024 and 07/08/2024 of:

TULALIP TRIBES BOARDING HOME  
7300 Totem Beach Rd  
Tulalip, WA 98271

This document references the following complaint number(s): 136149

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

The department staff that investigated the Assisted Living Facility:

Syng To, ALF Complaint Investigator  
Nicholette Flynn, AFH Field Manager

From:  
DSHS, Aging and Long-Term Support Administration  
Residential Care Services, Region 2 , Unit A  
3906-172nd St NE, Suite #100  
Arlington, WA 98223

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.

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

\_\_\_\_\_  
Administrator (or Representative)

\_\_\_\_\_  
Date

**WAC 388-78A-2040 Other requirements.**

(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 interviews and record reviews, the Assisted Living Facility (ALF) failed to maintain compliance with the Washington State Patrol Fire Protection Bureau when the ALF failed 2 of 2 Fire and Life Safety annual inspections (05/14/2024 and 06/24/2024). This failure placed all residents at risk of harm in the event of a fire.

Findings included...

Review of the Washington State Patrol Fire Protection Bureau report dated 05/14/2024 and 06/24/2024, showed the ALF had failed to comply with International Fire Code (IFC) for two items.

During the Fire Marshal's second visit on 06/24/2024, the following items had not been corrected:

IFC 903.5.2021 Testing and Maintenance. The facility was unable to provide documentation for the annual sprinkler system inspection.

IFC 907.8.2021 Inspection, Testing and Maintenance. The facility was unable to provide documentation for the annual fire alarm system testing.

During an interview on 07/08/2024 at 01:09 PM, Staff A, Executive Director, stated that the ALF correction paperwork was sent to the Washington State Fire Marshal after the second inspection on 06/24/2024, but could not provide the date. Staff A stated they had not received compliance determination from the Fire Marshal after the correction documents were sent out.

On 07/10/2024 at 07:08 AM, Collateral contact (CC), Fire Marshal, stated that the ALF remained out of compliance.

**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, TULALIP TRIBES BOARDING HOME 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