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

Spokane Valley Seniors Housing, LLC
Fields Senior Living at Spokane Valley
16512 E Desmet Court
Spokane Valley, WA 99016

RE: Fields Senior Living at Spokane Valley License # 2669

Dear Administrator:

This letter addresses Compliance Determination(s) 80647 (Completion Date 07/17/2026) and 77859 (Completion Date 05/27/2026).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/17/2026 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-24681-2

The Department staff who did the on-site verification:
Anne Boyd, NCI Community Complaint Investigator

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

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

Residential Care Services
Investigation Summary Report

Provider/Facility: Fields Senior Living at Spokane Valley
License/Cert.#: 2669
Compliance Determination #: 77859
Investigator: Anne Boyd
Investigation Date(s): 05/20/2026 through 05/27/2026
Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 224207
Region/Unit #: RCS Region 1 / Unit B

Allegation(s):

1. Staff not counting narcotics
2. No training for staff
3. Staff without proper license
4. Staff not giving medications/medication administration
5. Long call wait time

Investigation Methods:

Sample:
Total residents: 120
Resident sample size: 5
Closed records sample size: 0

Observations:
Residents
Resident rooms
Staff to resident interactions
Resident to resident interactions
Medication administration

Interviews:
Residents
Executive director
Nurse
Memory Care Director
Medtech
Caregiver

Record Reviews:
Sample resident care plan/face sheet
Sample staff license credentials, background check, training certifications
Narcotic log book
Medication Administration policy
Disclosure of Services
Characteristic roster
Staff roster

Investigation Summary:

1. Record review and interviews showed staff were following their medication

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process protocol and had been counting narcotics as required. Facility investigated allegation of staff not counting narcotics. Staff interviewed were knowledgeable of the process of medication reconciliation and denied concerns of staff not counting narcotics. Findings do not support failed facility practice.
2. Staff interviewed reported feeling supported in their role with training and education, record review and observation showed newly hired staff were provided orientation that included facility and job role orientation/expectations, facility tour, caregiver and medication technician checklist, and new staff were paired with seasoned staff for shadowing education before independence with role. Residents interviewed had no concerns with staff response to care needs, felt safe, and had staff to talk to about concerns. Residents were observed without distress or unmet health needs, and staff were assisting residents during unannounced facility visit. Findings do not support failed facility practice.
3. Sample staff license and training credentials were reviewed, along with sample Washington State Name and Date of Birth and Federal background checks. Deficient practice identified and cited for WAC 388-78A-246812).
4. Residents interviewed had no concerns with medication availability, record review and interview showed facility had investigated allegation of a staff member not administrating medications and leaving them in the medication cart. Staff interviewed reported an incident where one resident had been out of the building during medication administration, their medications had been struck from their medication administration record to reflect accuracy. and staff had been provided ongoing training/education regarding medication process. Staff interviewed were knowledgeable of medication administration processes. Residents were observed without distress or unmet health needs, and staff were assisting residents during unannounced facility visit. Findings do not support failed facility practice.
5. Observation, interview, and record review showed facility had a process to audit call light system, had audited system daily, and followed up with residents and staff as needed for lengthy call log times. Residents interviewed had no concerns with long call wait times, felt safe, and can talk to staff about concerns. Residents were observed without distress or unmet health needs, and staff were assisting residents during unannounced facility visit. Findings do not support failed facility practice.

Conclusion / Action:

- [x] 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 #: 2669	Compliance Determination #77859
Plan of Correction	Fields Senior Living at Spokane Valley	Completion Date
Page 1 of 3	Licensee: Spokane Valley Seniors Housing, LLC	05/27/2026

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 an unannounced on-site complaint investigation on 05/20/2026 of:

Fields Senior Living at Spokane Valley
16512 E Desmet Court
Spokane Valley, WA 99016

This document references the following complaint number(s): 224207, 225128

The following sample was selected for review during the unannounced on-site visit: 5 of 120 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Anne Boyd, NCI Community Complaint Investigator

From:
DSHS, Home and Community Living Administration
Residential Care Services, Region 1 , Unit B
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

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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.

Residential Care Services — 05/29/2026 (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) — 6-3-26 (Date)

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:

(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 facility failed to ensure that a national fingerprint background check was initiated before employing and allowing unsupervised access to residents for 2 of 4 sampled staff (Staff B and C). This failure placed residents at risk of receiving unsupervised care from potentially disqualified staff.

Findings included...

Review of Staff B's, Medication Technician, personnel file showed a hire date of 01/06/2026. Further review showed that no national fingerprint background check had been initiated.

Review of Staff C's, Medication Technician, personnel file showed a hire date of 02/12/2026. Further review showed that no national fingerprint background check had been initiated.

In an interview on 05/20/2026 at 3:05PM, Staff A, Business office manager, verified that they were the staff member responsible for tracking required staffing records. Staff A further stated that in review of staffing records for Staff B and Staff C, their records

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showed no national
fingerprint background check had been initiated.

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, Fields Senior Living at Spokane Valley is or will be in compliance with this law and / or regulation on
(Date) 7-10-26

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

Administrator (or Representative) — 6-3-26 Date

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