



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

07/31/2025

AHR Battle Ground WA ALF TRS Sub, LLC
Mallard Landing Senior Assisted Living Community
813 SE Clark Ave
Battle ground, WA 98604

RE: Mallard Landing Senior Assisted Living Community # 2720

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 62082 (Completion Date 07/31/2025) and 59378 (Completion Date 05/07/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/31/2025 and found no deficiencies.

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

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.

The Department staff who did the On Site verification:
Jason Rose

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

Sincerely,

Clinton Fridley, Adult Family Home Nurse Field Manager
Region 3, Unit I
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: Mallard Landing Senior
Assisted Living Community

License/Cert.#: 2720

Compliance Determination #: 59378

Investigator: Jason Rose

Investigation Date(s): 05/07/2025 through 05/07/2025

Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 178580

Region/Unit #: RCS Region 3 / Unit I

Allegation(s):

1.Life / safety code: Facility failed to make identified repairs as outlined by fire marshal to be complaint with fire code.

Investigation Methods:

Sample:	Total residents: 69 Resident sample size: 0 Closed records sample size: 0
Observations:	Residents Facility doors
Interviews:	Executive director
Record Reviews:	Fire Mashal inspections, violations, and letters. E-mail communications

Investigation Summary:

1.Life / safety code: Facility failed to make identified repairs as outlined by fire marshal to be complaint with fire code.

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 #: 2720	Compliance Determination # 59378
Plan of Correction	Mallard Landing Senior Assisted Living Community	Completion Date
Page 1 of 3	Licensee: AHR Battle Ground WA ALF TRS Sub, LLC	05/07/2025

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 05/07/2025 of:

Mallard Landing Senior Assisted Living Community
813 SE Clark Ave
Battle ground, WA 98604

This document references the following complaint number(s): 178520

The following sample was selected for review during the unannounced on-site visit: 0 of 69 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Jason Rose

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

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Statement of Deficiencies	License #: 2720	Compliance Determination # 59378
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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.

Clinton Fridley
Residential Care Services

05/15/2025
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)

5/15/25
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 record review and interview, the facility failed to stay in compliance with the Washington State Patrol Fire Protection Bureau for two consecutive inspections. This failure placed all residents, visitors, and staff life and safety at risk in the event of a fire.

Findings included...

Record review on 05/07/2025, of inspection reports from Washington State Patrol Fire Protection Bureau, dated 01/10/2025 and 02/22/2025, revealed the following:

- Fire inspection of facility conducted on 01/10/2025 revealed 10 statements of violation.
- Fire inspection of facility on 02/20/2025 revealed five statements of violation uncorrected from the 01/10/2025 inspection. These were: (1) "Annual Fire door inspection shall be concluded"; (2) "Multiple doors throughout building found to with excessive gaps"; (3) Fire doors shall accessories removed from doors such as wreaths"; (4) "Facility Failed to provide 4 year fire damper inspection report."; (5) "Smoke detector sensitivity shall be checked within one year after installation of new device."

The code requirements for these violations include: "...barriers shall be inspected and

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maintained in accordance with NFPA 80..." (NFPA is the National Fire Protection Agency. NFPA 80 is the standard for fire doors, and other opening protectives. NFPA.org.), "Dampers protecting ducts and air transfer openings shall be inspected and maintained in accordance with NFPA 80 and NFPA 105...", "Smoke detector sensitivity shall be checked within one year after installation and every alternate year thereafter."

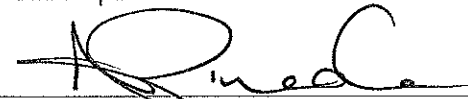
Record review on 05/07/2025, of e-mail communication between Staff A, executive director, and Collateral Contact 1, Deputy Fire Marshal. Staff A reported everything was complete aside from the doors, and requested an extension as the facility was waiting for a final bid for repairs to be approved. On 03/26/2025 a 30-day extension had been approved by Collateral contact 1.

On 05/07/2025 at 02:15 pm, Staff A stated that all bids have been completed. No repair work had been contracted, approved, or started. Staff A understood that the 30-day extension had expired.

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, Mallard Landing Senior Assisted Living Community is or will be in compliance with this law and / or regulation on
(Date) 6/30/2025 ~~NO~~
6/21/25

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



Administrator (or Representative)

5/15/25

Date