



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

HSRE-Springs IX TRS, LLC
The Springs at The Waterfront
1015 W Columbia Way
Vancouver, WA 98660

RE: The Springs at The Waterfront License # 2737

Dear Administrator:

This letter addresses Compliance Determination(s) 61156 (Completion Date 06/16/2025) and 58914 (Completion Date 05/02/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 06/16/2025 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-2468-1

The Department staff who did the off-site verification:

Kyle Gehlen, ALF Licensor - LTC
Jennifer Siharath, ALF Licensor

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



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|---------------------------|------------------------------------|----------------------------------|
| Statement of Deficiencies | License #: 2737 | Compliance Determination # 58914 |
| Plan of Correction | The Springs at The Waterfront | Completion Date |
| Page 1 of 3 | Licensee: HSRE-Springs IX TRS, LLC | 05/02/2025 |

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 the unannounced on-site full inspection on 05/01/2025 and 05/02/2025 of:

The Springs at The Waterfront
1015 W Columbia Way
Vancouver, WA 98660

The following sample was selected for review during the unannounced on-site visit: 5 of 25 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Jennifer Siharath, ALF Licenser
Kyle Gehlen, ALF Licenser - LTC

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

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.

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| Residential Care Services | Date |
| <p>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.</p> | |
| Administrator (or Representative) | Date |

WAC 388-78A-2468 Background checks Employment Conditional hire Pending results of Washington state name and date of birth background check. The assisted living facility may conditionally hire an administrator, caregiver, or staff person directly or by contract, pending the result of the Washington state name and date of birth background check, provided that the assisted living facility:

- (1) Submits the background authorization form for the person to the department no later than one business day after he or she starts working;

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to complete a Washington State name and date of birth background check no later than one business day after 4 of 5 sampled staff (Staff D, E, F, and G) were hired. This failure placed all residents and staff at risk for harm by possibly employing staff with a disqualifying criminal conviction(s) or pending charge(s) for a disqualifying crime(s).

Findings included...

During an unannounced licensing inspection on 05/01/2025 at 12:00 PM, the department received the requested staff documents.

Staff D

Record review for Staff D, Medication Technician, showed that Staff D was hired on 01/14/2025. Documentation of a Washington State name and date of birth background check for Staff D showed that it was completed on 02/27/2025.

Staff E

Record review for Staff E, Medication Technician, showed that Staff E was hired on 01/15/2025. Documentation of a Washington State name and date of birth background check for Staff E showed that it was completed on 03/24/2025.

Staff F

Record review for Staff F, Medication Technician, showed that Staff F was hired on 11/11/2024. Documentation of a Washington State name and date of birth background check for Staff F showed that it was completed on 04/21/2025.

Staff G

Record review for Staff G, Medication Technician, showed that Staff G was hired on 11/01/2024. Documentation of a Washington State name and date of birth background check for Staff G showed that it was completed on 02/27/2025.

During an exit interview on 05/02/2025 at 1:00 PM, Staff A, Executive Director, acknowledged that the Washington State name and date of birth background checks for Staff D, E, F, and G were completed late.

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| 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, The Springs at The Waterfront 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 |