



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

10/02/2025

RP Operations, LLC
Rose Pointe Assisted Living
13013 E Mission Ave
Spokane Valley, WA 99216

RE: Rose Pointe Assisted Living # 2452

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 66516 (Completion Date 10/02/2025) and 63438 (Completion Date 08/19/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 10/02/2025 and found no deficiencies.

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

WAC 388-78A-3090 Maintenance and housekeeping.

(1) The assisted living facility must:

(d) Ensure each resident or staff person maintains the resident's quarters in a safe and sanitary condition consistent with the negotiated service agreement.

The Department staff who did the On Site verification:

Abigail Vanderkolk, 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: Rose Pointe Assisted Living **Provider Type:** Assisted Living Facility

License/Cert.#: 2452

Intake ID: 187373

Compliance Determination #: 63438

Region/Unit #: RCS Region 1 / Unit B

Investigator: Abigail Vanderkolk

Investigation Date(s): 07/31/2025 through 08/19/2025

Complainant Contact Date(s):

Allegation(s):

1. The facility has cockroaches and bed bugs.
 2. The facility is dirty.
-

Investigation Methods:

Sample:	Total residents: 87 Resident sample size: 14 Closed records sample size: 0
Observations:	Residents Resident care equipment Resident rooms Common Spaces Pest Control Methods Resident Restrooms
Interviews:	Residents Nurse Maintenance Director Housekeeping Lead Resident Care Coordinator Pest Control Contractor
Record Reviews:	Disclosure of Services Pest Control Service Documents Staff Roster Characteristic Roster Abuse and Neglect Reporting Policy Resident Care Plans Housekeeping Schedule

Investigation Summary:

1. The facility failed to maintain the resident's living quarters in a safe and sanitary condition and was found to be out of compliance with WAC 388-78A-3090.
2. The facility failed to maintain the resident's living quarters in a safe and sanitary condition and was found to be out of compliance with WAC 388-78A-3090.

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 #: 2452	Compliance Determination # 63438
Plan of Correction	Rose Pointe Assisted Living	Completion Date
Page 1 of 5	Licensee: RP Operations, LLC	08/19/2025

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 08/14/2025 and 07/31/2025 of:

Rose Pointe Assisted Living
13013 E Mission Ave
Spokane Valley, WA 99216

This document references the following complaint number(s): 187373

The following sample was selected for review during the unannounced on-site visit: 14 of 87 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Abigail Vanderkolk, Community Complaint Investigator
Amy Wright, NCI Complain Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit B
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

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

Statement of Deficiencies	License #: 2452	Compliance Determination # 63436
Plan of Correction	Rose Pointe Assisted Living	Completion Date
Page 2 of 5	Licensee: RP Operations, LLC	08/19/2025

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.

Laura Williams-Davis
Residential Care Services

08/27/2025
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.



Administrator (or Representative)

8.28.25

Date

WAC 388-78A-3090 Maintenance and housekeeping.

(1) The assisted living facility must:

(d) Ensure each resident or staff person maintains the resident's quarters in a safe and sanitary condition consistent with the negotiated service agreement.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the facility failed to ensure that the residents' quarters were maintained in a safe and sanitary condition consistent with the resident's negotiated service agreement for 11 of 14 residents (Residents 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, and 11). This failed practice resulted in unhygienic living quarters which placed affected residents at risk for decreased quality of life and exposure to contaminants and allergens.

Findings included...

Review of an undated disclosure of services, showed that the facility was to maintain the residents' living quarters and other areas they may use in a safe, clean and comfortable condition.

In an interview on 07/29/2025 at 1:32 PM, Staff A, Maintenance Director, stated that the facility had been dealing with an infestation of cockroaches for the last three and a half months. Staff A stated that a pest control company came in and placed traps near the refrigerators in the residents' rooms where the roaches had been spotted. Staff A stated there were no health concerns with cockroaches, though they were a nuisance and hard to get rid of. Staff A stated that some residents brought up concerns about the cockroaches.

In an interview on 08/07/2025 at 11:58 AM, Collateral Contact 1 (CC1), Account Manager with the facility's pest control company, stated that on 06/03/2025 or

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.

Administrator (or Representative)

Date

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Findings included...

Review of an undated disclosure of services, showed that the facility was to maintain the residents' living quarters and other areas they may use in a safe, clean and comfortable condition.

In an interview on 07/29/2025 at 1:32 PM, Staff A, Maintenance Director, stated that the facility had been dealing with an infestation of cockroaches for the last three and a half months. Staff A stated that a pest control company came in and placed traps near the refrigerators in the residents' rooms where the roaches had been spotted. Staff A stated there were no health concerns with cockroaches, though they were a nuisance and hard to get rid of. Staff A stated that some residents brought up concerns about the cockroaches.

In an interview on 08/07/2025 at 11:58 AM, Collateral Contact 1 (CC1), Account Manager with the facility's pest control company, stated that on 06/03/2025 or

06/04/2025, they went to the facility for an inspection and they saw that Rooms 1-15 showed signs of cockroach infestation. CC1 stated they gave the facility glue traps for monitoring. CC1 stated that a couple of days later they sent a quote for cockroach extermination to the facility. CC1 stated that on 08/18/2025, they noticed the quote was never looked at. CC1 stated they then called the facility three or four times but received no response from the facility. CC1 stated that the facility is contracted for general pest control, but they do not have a contract with the facility for cockroach management. CC1 stated that the glue boards were used for monitoring and not for treatment, and that nobody from the pest control company had gone out to the facility for extermination services. CC1 stated that cockroaches carried several allergens, they were extremely unhygienic, and they crawled over food sources that humans left out. CC1 stated that this side of the state had German cockroaches, which spread twice as fast as other roaches, and they left fecal matter.

In an interview on 08/07/2025 at 12:25 PM, Staff A stated that a quote was sent to Staff B, Executive Director, but Staff A was not sure what happened after that.

In an interview on 08/14/2025 at 11:28 AM, Staff B stated that it was back in March 2025, the pest control company initially came out regarding the cockroaches. Staff A stated they did not recall seeing the quote for cockroach extermination the first time it was sent a few months ago.

<Room █>

Review of an undated facility characteristic roster, showed that Resident 10 and Resident 11 lived in Room █.

Review of a negotiated service agreement (NSA) for Resident 11, dated 12/23/24, showed that the resident's housekeeping and home management needs were to be met by the facility.

Review of an NSA for Resident 10, dated 02/27/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

An observation on 07/29/2025 at 2:30 PM, showed a cockroach in a trap in Room █.

<Room █>

Review of an undated facility characteristic roster, showed that Resident 3 and Resident 4 lived in Room █.

Review on an NSA for Resident 4, dated 07/30/2024, showed that the resident's housekeeping and home management needs were to be met by the facility.

Review of an NSA for Resident 3, dated 02/10/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

An observation on 07/29/2025 at 2:00 PM, showed an adult cockroach in a trap behind the refrigerator in Room █.

An observation on 08/14/2025 at 12:26 PM, showed that the carpet between the

residents' rooms in Room ■ was nearly entirely covered with brown stains of varying sizes.

<Room ■>

Review of an undated facility characteristic roster, showed that Resident 8 and Resident 9 lived in Room ■.

Review of an NSA for Resident 9, dated 02/13/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

Review of an NSA for Resident 8, dated 04/25/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

An observation on 07/29/2025 at 2:30 PM, showed two cockroaches on a cupboard in Room ■.

<Room ■>

Review of an undated facility characteristic, roster showed that Resident 5 lived in Room ■.

Review of an NSA for Resident 5, dated 02/11/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

An observation on 07/29/2025 at 2:30 PM, showed multiple cockroaches in a sticky trap by the refrigerator in Room ■. The observation showed remnants of cockroaches near the resident's sink and on the counter below the refrigerator.

An observation on 08/14/2025 at 12:48 PM showed a cockroach trap next to the resident's refrigerator in Room ■ that was completely covered with cockroach carcasses.

In an interview on 08/14/2025 at 12:50 PM, Resident 5 stated that when they saw a cockroach in their room and they stepped on it.

<Room ■>

Review of an undated facility characteristic roster, showed that Resident 1 and Resident 2 lived in Room ■.

Review of an NSA for Resident 2, dated 01/25/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

Review of an NSA for Resident 1, dated 02/13/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

An observation on 07/29/2025 at 2:00 PM, showed multiple cockroaches on a sticky trap behind the refrigerator in Room ■.

In an interview on 07/29/2025 at 2:15 PM, Resident 1 and Resident 2 stated they saw

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cockroaches in the trap by their refrigerator. They stated that once they saw one on the wall and Resident 1 killed it.

<Room [REDACTED]>

Review of an undated facility characteristic roster, showed that Resident 6 and Resident 7 lived in Room [REDACTED].

Review of an NSA for Resident 6, dated 11/06/2024, showed that the resident's housekeeping and home management needs were to be met by the facility.

Review of an NSA for Resident 7, dated 04/03/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

An observation on 07/29/2025 at 2:20 PM, showed approximately five cockroaches in a sticky trap near the refrigerator in Room [REDACTED].

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, Rose Pointe Assisted Living is or will be in compliance with this law and / or regulation on (Date) 9-19-25.

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



Administrator (or Representative)

8-28-25

Date

cockroaches in the trap by their refrigerator. They stated that once they saw one on the wall and Resident 1 killed it.

<Room [REDACTED]>

Review of an undated facility characteristic roster, showed that Resident 6 and Resident 7 lived in Room [REDACTED].

Review of an NSA for Resident 6, dated 11/06/2024, showed that the resident's housekeeping and home management needs were to be met by the facility.

Review of an NSA for Resident 7, dated 04/03/2025, showed that the resident's housekeeping and home management needs were to be met by the facility.

An observation on 07/29/2025 at 2:20 PM, showed approximately five cockroaches in a sticky trap near the refrigerator in Room [REDACTED].

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, Rose Pointe Assisted Living 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