



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 UNITED METHODIST HOMES

Rockwood at Whitworth
10331 N Mayberry Drive
Spokane, WA 99218

RE: Rockwood at Whitworth License # 2577

Dear Administrator:

This letter addresses Compliance Determination(s) 77348 (Completion Date 05/14/2026) and 75362 (Completion Date 04/03/2026).

The Department completed a follow-up inspection of your Assisted Living Facility on 05/14/2026 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-2480-1

The Department staff who did the on-site verification:
Joy Pipgras, LTC Surveyor

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



Residential Care Services Investigation Summary Report

Provider/Facility: Rockwood at Whitworth

Provider Type: Assisted Living Facility

License/Cert.#: 2577

Intake ID: 217895

Compliance Determination #: 75362

Region/Unit #: RCS Region 1 / Unit B

Investigator: Tethra Wales

Investigation Date(s): 04/03/2026 through 04/03/2026

Complainant Contact Date(s):

Allegation(s):

Staff record review

Investigation Methods:

Sample:	Total residents: 75 Resident sample size: 3 Closed records sample size: 0
Observations:	Staff and resident interactions Staff presence and availability to residents Staff providing cares to residents.
Interviews:	Administrator Residents Nursing Administration staff
Record Reviews:	Characteristic Roster Staff List Staff Schedule Staff Records

Investigation Summary:

Staff records were reviewed for three sampled staff that were hired since the prior inspection. The facility failed to screen for tuberculosis for 2 of the 3 sampled staff within the required three days. Failed facility practice cited under WAC 388-78A-2480(1).

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 #: 2577	Compliance Determination # 75362
Plan of Correction	Rockwood at Whitworth	Completion Date
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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 04/03/2026 of:

Rockwood at Whitworth
 10331 N Mayberry Drive
 Spokane, WA 99218

This document references the following complaint number(s): 217895

The following sample was selected for review during the unannounced on-site visit: 3 of 75 current residents and 0 former residents.

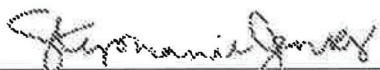
The department staff that investigated the Assisted Living Facility:

Tethra Wales, Assisted Living Facility Licenser

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

04/07/2026

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)

4/14/26

Date

WAC 388-78A-2480 Tuberculosis Testing Required.

(1) The assisted living facility must develop and implement a system to ensure each staff person is screened for tuberculosis within three days of employment.

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to ensure tuberculosis screenings were conducted within three days of employment for 2 of 3 staff (Staff A and C). This failure placed residents at risk of exposure to a communicable disease.

Findings included...

<Staff A>

Review of Staff A's, Nursing Assistant Certified (NAC), personnel file showed that they were hired on 03/17/2025. Further review showed that the first step of their Tuberculosis (TB, a communicable respiratory disease) testing was conducted on 04/14/2025.

In an interview on 04/03/2026 at 3:35 PM, Staff D, General Manager, confirmed that no testing for TB had been completed for Staff A prior to the 04/14/2025 test.

<Staff C>

Review of Staff C's, NAC, personnel file showed that they were hired on

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05/05/2025. Further review showed that the first step of their TB testing was conducted on 12/01/2025.

In an interview on 04/03/2026 at 3:35 PM, Staff D confirmed that no testing for TB had been completed for Staff C prior to the 12/01/2025 test.

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, Rockwood at Whitworth is or will be in compliance with this law and / or regulation on (Date) 5/5/26.

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



Administrator (or Representative)

4/14/26

Date



10322 N Middleton Dr.
Spokane, WA 99218
T: 509.466.0411
www.rockwoodretirement.org

April 14, 2026

Stephanie Jenks, Community Field Manager
Residential Care Services, Region 1, Unit B
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

Re: Plan of Correction

Dear Ms. Jenks,

Preparation and execution of this response and plan of correction does not constitute an admission or agreement by the provider of truth of the facts alleged or conclusions cited as deficiencies in the department's report. The plan of correction is prepared and/or executed solely because it is required by the provisions of Federal and/or State law. For the purpose of any allegation that the facility is not in substantial compliance with requirements of participation, the response and plan of correction constitute the facility's allegation of compliance.

The following plan of correction constitutes a summary of individual corrective actions, systemic changes, and measures to assure on-going compliance. Please accept the following plan of correction, with a planned date of correction being May 5, 2026, as our credible allegation of compliance for the deficiency cited following the unannounced on-site complaint inspection conducted 4/3/26.

Please feel free to contact me if you have any questions or if additional information is needed.

Sincerely,


Stephen Collette, General Manager
Rockwood at Whitworth

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

Cited Deficiency:

WAC 388-78A-2480 Tuberculosis Testing Required.

It is the policy of Rockwood at Whitworth to develop and implement a system to ensure each staff person is screened for tuberculosis within 3 days of employment.

- Review of Staff A's personnel file showed the tuberculosis testing did not take place within 3 days of employment.
- Review of Staff C's personnel file showed the tuberculosis testing did not take place within 3 days of employment.

Rockwood at Whitworth has an existing policy/procedure for tuberculosis testing, indicating that testing is to take place within 3 days of employment.

In order to ensure compliance, the existing policy will be reviewed and revised, as necessary. Education, regarding tuberculosis testing requirements, will then be provided to team members by May 5, 2026. Team members will include Human Resources personnel, department managers, and the campus nurse. In addition, each new employee will receive tuberculosis testing education upon hire. Human Resources personnel will be responsible for reviewing all employee files to ensure tuberculosis testing has taken place, as required. Employee files will be reviewed by April 28, 2026. In addition, Human Resources personnel will review personnel files monthly for three (3) months, then routinely as necessary to ensure ongoing compliance. Vice President of Human Resources, and or designee, to ensure compliance.