STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
***1200 Alder Street, Union Gap, WA 98903***

EMERITUS CORPORATION
Brookdale Torbett
221 Torbett St
Richland, WA 99354

RE: Brookdale Torbett License # 2325

Dear Administrator:

This letter addresses Compliance Determination(s) 81282 (Completion Date 07/29/2026) and 80760 (Completion Date 07/21/2026).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/29/2026 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-2040-1

The Department staff who did the on-site verification:
Jessica Clapp, Assisted Living Facility Licensor

If you have any questions, please contact me at (509)208-5231.

Sincerely,

Laura Williams-Davis

Laura Williams-Davis, ALF Field Manager
Region 1, Unit G
Residential Care Services

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

# Residential Care Services
## Investigation Summary Report

**Provider/Facility:** Brookdale Torbett
**Provider Type:** Assisted Living Facility
**License/Cert.#:** 2325
**Compliance Determination #:** 80760
**Intake ID:** 232146
**Investigator:** Jessica Clapp
**Region/Unit #:** RCS Region 1 / Unit G
**Investigation Date(s):** 07/21/2026 through 07/21/2026
**Complainant Contact Date(s):**

**Allegation(s):**
Failed fire marshal inspection.

**Investigation Methods:**

| | |
|---|---|
| **Sample:** | Total residents: 42<br>Resident sample size: 42<br>Closed records sample size: 0 |
| **Observations:** | Residents<br>Activities<br>Staff to resident interactions<br>Resident to resident interactions |
| **Interviews:** | Administrator |
| **Record Reviews:** | Characteristic Roster<br>Fire Marshal Report |

**Investigation Summary:**
Interview and record review showed that the facility failed the Deputy State Fire Marshal inspection. Failed practice identified. Refer to Washington State Administrative Code (WAC) 388-78A-2040(1).

**Conclusion / Action:**

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

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STATE OF WASHINGTON

# DEPARTMENT OF SOCIAL AND HEALTH SERVICES

HOME AND COMMUNITY LIVING ADMINISTRATION

***1200 Alder Street, Union Gap, WA 98903***



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 07/21/2026 of:

Brookdale Torbett
221 Torbett St
Richland, WA 99354

This document references the following complaint number(s): 232146

The following sample was selected for review during the unannounced on-site visit: 42 of 42 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Jessica Clapp, Assisted Living Facility Licensor

From:
DSHS, Home and Community Living Administration
Residential Care Services, Region 1 , Unit G
1200 Alder Street
Union Gap, WA 98903

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| Statement of Deficiencies | License #: 2325 | Compliance Determination # 80760 |
|---|---|---|
| Plan of Correction | Brookdale Torbett | Completion Date |
| Page 2 of 3 | Licensee: EMERITUS CORPORATION | 07/21/2026 |

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 — 07/27/2026

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.

Sarah McCollum — 7/27/2026

Administrator (or Representative) — Date

**WAC 388-78A-2040 Other requirements.**

(1) The assisted living facility must comply with all other applicable federal, state, county and municipal statutes, rules, codes and ordinances, including without limitations those that prohibit discrimination.

**This requirement was not met as evidenced by:**

Based on interview and record review, the facility failed to maintain compliance with the Washington State Patrol Fire Protection Bureau when the Deputy State Fire Marshal found the facility in continued violation of five codes during the reinspection. This failure placed residents living in the facility, staff and visitors at risk of harm in the event of a fire.

Findings included...

Record review of the Washington State Patrol Fire Protection Bureau report, dated 05/06/2026, showed that the facility failed their initial inspection. The follow-up inspection, dated 07/13/2026, showed that the facility continued to violate the following requirements:

- The activities office had an air conditioning unit that was plugged into the wall using an extension cord.
- The facility was not able to provide documentation of spaces inspected for penetration through fire-resistant-rated construction and construction installed to resist the passage of smoke.
- The facility was not able to provide documentation that the deficiencies from the fire extinguisher report dated 03/09/2026 were fixed.
- The fire alarm breaker did not have a breaker lock installed.

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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.

Laura Williams-Davis — Residential Care Services

07/27/2026 — 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)

Date

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- The facility was not able to provide documentation that the deficiencies from the fire extinguisher report dated 03/09/2026 were fixed.
- The fire alarm breaker did not have a breaker lock installed.

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- The facility completed a silent alarm between the hours of 10:00 PM and 6:00 AM, did not mark that it was a silent alarm and did not complete the document correctly.

In an interview on 07/21/2026 at 01:50 PM, Staff A, Administrator, acknowledged the Fire Marshal Report and stated that they were working with the Fire Marshal to correct the violations.

**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, Brookdale Torbett is or will be in compliance with this law and / or regulation on (Date) 7/28/2026

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

Administrator (or Representative) Farah McAdam Date 7/27/2026

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In an interview on 07/21/2026 at 01:50 PM, Staff A, Administrator, acknowledged the Fire Marshal Report and stated that they were working with the Fire Marshal to correct the violations.

**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, Brookdale Torbett 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

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