



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

FEDERAL WAY MEDICAL INVESTORS LLC
Garden Terrace Healthcare Center of Federal Way
491 S 338TH STREET
FEDERAL WAY, WA 98003

RE: Garden Terrace Healthcare Center of Federal Way License # 1631

Dear Administrator:

This letter addresses Compliance Determination(s) 68055 (Completion Date 10/30/2025) and 64500 (Completion Date 09/16/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 10/30/2025 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-2210-1-b

The Department staff who did the on-site verification:
Kailash Sharma, ALF Licenser

If you have any questions, please contact me at (206)305-3489.

Sincerely,

James Sherman, Field Manager
Region 2, Unit D
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: Garden Terrace Healthcare Center of Federal Way
License/Cert.#: 1631
Compliance Determination #: 64500
Investigator: Kailash Sharma
Investigation Date(s): 08/21/2025 through 09/16/2025
Complainant Contact Date(s):

Provider Type: Assisted Living Facility
Intake ID: 188217
Region/Unit #: RCS Region 2 / Unit D

Allegation(s):

Medication diversion and tampering.

Investigation Methods:

Sample:	Total residents: 12 Resident sample size: 3 Closed records sample size: 0
Observations:	General tour of facility, lobby, common area, memory care, dining room, medication room, medication cart, medication storage, resident room and status.
Interviews:	Executive Director, Director of Nursing, Assistant Director of Nursing, Nurses, complainant.
Record Reviews:	Incident reports, investigation report, characteristic roster, service plan, progress notes, medication records, narcotic records book, Medication management policy, medication diversion investigation policy.

Investigation Summary:

The facility conducted an internal investigation and found unsubstantiated allegations of medication tampering, suspended two staff and law enforcement notified. Multiple medication spillages of liquid narcotic and changed color of liquid medication were noted. Facility staff inserviced regarding medication management. Failed practice was identified. A citation was issued for noncompliance with WAC 388-78A-2210 (1) (b) Medication Services.

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A



Residential Care Services Investigation Summary Report

Provider/Facility: Garden Terrace Healthcare **Provider Type:** Assisted Living Facility
Center of Federal Way
License/Cert.#: 1631 **Intake ID:** 191073
Compliance Determination #: 64500 **Region/Unit #:** RCS Region 2 / Unit D
Investigator: Kailash Sharma
Investigation Date(s): 08/21/2025 through 09/16/2025
Complainant Contact Date(s):

Allegation(s):

1. Medication diversion and tempering.
 2. Found whole pills on bed, resident on crushed medication.
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Investigation Methods:

Sample:	Total residents: 12 Resident sample size: 3 Closed records sample size: 0
Observations:	General tour of facility, lobby, common area, memory care, dining room, medication room, medication cart, medication storage, resident room and status.
Interviews:	Executive Director, Director of Nursing, Assistant Director of Nursing, Nurses, complainant.
Record Reviews:	Incident reports, investigation report, characteristic roster, service plan, progress notes, medication records, narcotic records book, Medication management policy, medication diversionification investigation policy.

Investigation Summary:

1. The facility conducted an internal investigation and found unsubstantiated allegations of medication tampering, suspended two staff and law enforcement notified. Multiple medication spillages of liquid narcotic and changed color of liquid medication were noted. Facility staff in-serviced regarding medication management. 2. Staff stated they had in-serviced nurses to crush pills properly as per orders. Failed practice was identified. A citation was issued for noncompliance with WAC 388-78A-2210 (1) (b) Medication Services.

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 #: 1631	Compliance Determination # 64500
Plan of Correction	Garden Terrace Healthcare Center of Federal Way	Completion Date
Page 1 of 4	Licensee: FEDERAL WAY MEDICAL INVESTORS LLC	09/16/2025

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 08/21/2025 of:

Garden Terrace Healthcare Center of Federal Way
491 S 338TH STREET
FEDERAL WAY, WA 98003

This document references the following complaint number(s): 188217, 191073

The following sample was selected for review during the unannounced on-site visit: 3 of 12 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Kailash Sharma, ALF Licenser

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit D
20425 72nd Avenue S, Suite 400
Kent, WA 98032

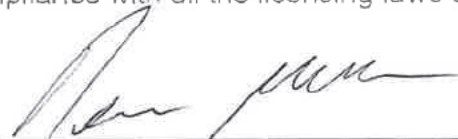
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Statement of Deficiencies	License #: 1631	Compliance Determination # 64500
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Page 2 of 4	Licensee: FEDERAL WAY MEDICAL INVESTORS LLC	09/16/2025

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.

<u>James Sherman</u>	09-25-2025
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.

	<u>10/1/2025</u>
Administrator (or Representative)	Date

WAC 388-78A-2210 Medication services.

- (1) An assisted living facility providing medication service, either directly or indirectly, must:
- (b) Develop and implement systems that support and promote safe medication service for each resident.

This requirement was not met as evidenced by:

WAC 388-78A-2210 Medication services. (1) An assisted living facility providing medication service, either directly or indirectly, must:

(b) Develop and implement systems that support and promote safe medication service for each resident.

Based on interviews and record reviews, it showed that the facility failed to ensure safe handling and storage of liquid narcotic medication services for 1 of 2 residents (Resident 1). This failure placed Resident 1 at risk of increased pain, comfort issues, and a diminished quality of life.

Findings included...

RESIDENT 1

Review of Resident 1's assessment 05/09/2025 showed Resident 1 received medication services from facility staff and Hospice Services from an external provider. The assessment showed Resident 1 was prescribed narcotic liquid medication Oxycodone to treat pain. Oxycodone, an opioid, is a narcotic medication that treats severe pain.

Review of Resident 1's July 2025 Electronic-Medication Administration Record (eMAR)

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showed documentation of the medication order for liquid Oxycodone .25 ml (milliliter) 5 mg (milligrams), every 2 hours as needed for pain.

Review of Resident 1's July 2025 narcotic drug record (book), page number 26 showed that Resident 1 received 27 doses of Liquid Oxycodone .25 ml 5 mg, from July 12th through July 19th, 2025.

Review of Resident 1's July 2025 narcotic drug record, page number 26 showed multiple spills. A 07/12/2025 entry showed spillage of liquid Oxycodone 2.5 ml, on 07/16/2025 an entry showed wasted liquid Oxycodone 1.5 ml and an entry on 07/17/2025 showed spillage of liquid Oxycodone 1.25 ml.

Review of Resident 1's July 2025 narcotic drug record, page number 29 showed that Resident 1 received 15 doses of liquid Oxycodone .25 ml 5 mg, from July 20th through July 23rd, 2025.

Review of Resident 1's July 2025 narcotic drug record, page number 29 showed that on 07/21/2025 Liquid medication Oxycodone was missing in the amount of 0.5 ml. The remaining count on the record decreased from 8.5 to 8.0 ml.

During an Interview on 08/18/2025 at 11:35 AM, Staff C, Assistant Director of Nursing, stated that on 07/22/2025 a nurse had brought to their attention a change in the color of Resident 1's liquid Oxycodone medication. Staff C stated that they had internally investigated the possible tampering of narcotic medication and had suspended two staff members during the investigation.

Review of a statement dated 07/23/2025 showed Staff E, Registered Nurse, stated that Resident 1 had said that medication did not taste when given liquid Oxycodone.

During an interview on 09/10/2025 at 10:00 AM, Collateral Contact (CC) stated that on 07/25/2025, they were told by facility staff on the phone that the liquid narcotic medicine Oxycodone was spilled by the staff, staff panicked and filled it with water.

During an interview on 09/04/2025 at 11:45 AM, Staff A, Executive Director, stated that they had interviewed multiple staff members about accountability of Resident 1's liquid narcotic medication. Staff members interviewed stated that they had not tampered with liquid medication Oxycodone by adding water. Staff A stated that spilled or wasted medication was processed per policy by two nurses, and no patterns of discrepancy led to suspicion of medication diversion.

During an interview on 09/04/2025 at 12:00PM, Staff B, Director of Nursing, stated that they had no knowledge of staff mixing water in liquid Oxycodone medication.

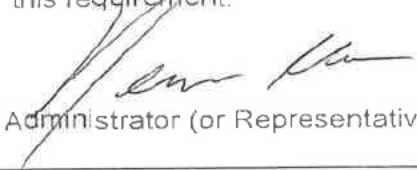
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During an interview 09/05/2025 12:00 PM, Staff B stated that they contacted a Pharmacist Consultant and inquired why rubber stoppers were not sent with the bottle of liquid oxycodone to prevent spillage. Pharmacist Consultant had stated that rubber stoppers were sent with the bottle of medication. Staff B stated that possibly color of liquid Oxycodone faded over time because medication was not stored with the rubber stopper.

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, Garden Terrace Healthcare Center of Federal Way is or will be in compliance with this law and / or regulation on (Date) 10/10/2025

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


Administrator (or Representative)

10/11/2025
Date