



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

07/07/2025

EMERITUS CORPORATION
Brookdale Stanwood
7212 265TH ST NW
STANWOOD, WA 98292

RE: Brookdale Stanwood # 2276

Dear Administrator:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 62109 (Completion Date 07/07/2025) and 55814 (Completion Date 05/14/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/07/2025 and found no deficiencies.

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

WAC 388-78A-2410 Content of resident records. The assisted living facility must organize and maintain resident records in a format that the assisted living facility determines to be useful and functional to enable the effective provision of care and services to each resident. Active resident records must include the following:

- (8) Medical and nursing services provided by the assisted living facility for a resident, including:
 - (a) A record of providing medication assistance and medication administration, which contains:
 - (ii) The time and date of any medication assistance or administration;
 - (iii) The signature or initials of the person providing any medication assistance or administration; and

The Department staff who did the On Site verification:
Teresa Pederson-Tuley, Nursing Consultant Institutional

If you have any questions, please contact me at (253)281-1245.

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

Sincerely,

Anthony Devito

Anthony Devito, Field Services Administrator
Region 2, Unit A
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: Brookdale Stanwood	Provider Type: Assisted Living Facility
License/Cert.#: 2276	
Compliance Determination #: 55814	Intake ID: 169027
Investigator: Kimberley Ripley	Region/Unit #: RCS Region 2 / Unit A
Investigation Date(s): 03/05/2025 through 05/14/2025	
Complainant Contact Date(s):	

Allegation(s):

The Assisted Living Facility (ALF) staff were not responding the Named Resident's (NR) requests for care.

Investigation Methods:

Sample:	Total residents: 64 Resident sample size: 4 Closed records sample size: 0
Observations:	Residents Resident/staff interactions ALF Community
Interviews:	Complainant Residents Care Staff Wellness Director
Record Reviews:	Incident Reports Investigations Medical Records Medical Administration Records (MAR) Progress notes Care Plans

Investigation Summary:

The NR stated that the staff were providing care. Staff reported the NR was receiving skin checks during showers, but the NR had been refusing help during showers. The NR did not report a skin issue until two days before going to the hospital. Records showed the nurse assessed the injury the day before the NR went to the hospital.

During record review, it was identified that the NR's Medication Administration Record showed missing documentation of medication administration limiting the ability to determine if the medications were provided. Failed practice was identified. A citation was issued for Washington Administrative Code 388-78A-2410 Content of Resident Records.

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 #: 2276	Compliance Determination # 55814
Plan of Correction	Brookdale Stanwood	Completion Date
Page 1 of 4	Licensee: EMERITUS CORPORATION	05/14/2025

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 03/05/2025 of:

Brookdale Stanwood
7212 265TH ST NW
STANWOOD, WA 98292

This document references the following complaint number(s): 169027

The following sample was selected for review during the unannounced on-site visit: 4 of 64 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Kimberley Ripley, Field Manager

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit A
3906-172nd St NE, Suite #100
Arlington, WA 98223

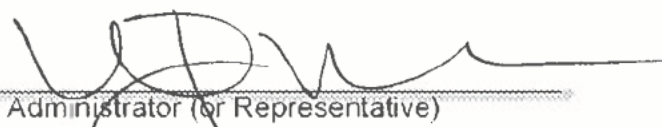
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Statement of Deficiencies	License #: 2276	Compliance Determination # 55814
Plan of Correction	Brookdale Stanwood	Completion Date
Page 2 of 4	Licensee: EMERITUS CORPORATION	05/14/2025

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.

 Residential Care Services	<u>5/14/2025</u> Date
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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)	<u>5/20/25</u> Date
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WAC 388-78A-2410 Content of resident records. The assisted living facility must organize and maintain resident records in a format that the assisted living facility determines to be useful and functional to enable the effective provision of care and services to each resident. Active resident records must include the following:

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This requirement was not met as evidenced by:

Based on interview and record review the Assisted Living Facility (ALF) failed to document in the resident records staff initials and if medications were given for 4 of 4 residents (Resident 1, 2, 3, and 4). These failures resulted in the ALF not knowing if the residents received their medications and placed the residents at risk of medical complications due to potentially not receiving their medications.

Findings included...

Resident 1

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Statement of Deficiencies	License #: 2276	Compliance Determination # 55814
Plan of Correction	Brookdale Stanwood	Completion Date
Page 3 of 4	Licensee: EMERITUS CORPORATION	05/14/2025

A Resident Characteristic Roster, dated 03/05/2025, showed the ALF admitted Resident 1 on [REDACTED]/2024 and Resident 1 required medication assistance.

Review of Resident 1's February 2025 Medication Administration Record (MAR) showed Resident 1 was not given two medications which were to be given on a regular schedule. The MAR showed one medication was not documented as administered on 02/06/2025 and the other was not documented as administered on 02/12/2025 as there were no initial indicating the medications were given.

Resident 2

A Resident Characteristic Roster, dated 03/05/2025, showed the ALF admitted Resident 2 on [REDACTED]/2023 and Resident 2 required medication assistance.

Review of Resident 2's February 2025 MAR showed Resident 2 was not given eight medications which were to be given on a regular schedule. The MAR showed that all 8 of the medications were not given on 02/28/2025 as there was no initial indicating the medications were given. The MAR also showed Resident 2 was to have compression stockings (a type of specialized footwear used to improve blood circulation, reduce swelling, and prevent blood clots in the legs) applied in the morning and then removed at bedtime. There were two instances where there was no documentation documenting this was done (02/18/2025 and 02/20/2025).

Resident 3

A Resident Characteristic Roster, dated 03/05/2025, showed the ALF admitted Resident 3 on [REDACTED]/2024 and Resident 3 required medication assistance.

Review of Resident 3's February 2025 MAR showed Resident 3 was not given two medications on a regular schedule. The MAR showed that one of the medications was not documented as being given on 02/05/2025 and the other one was not documented as given on 02/06/2025 as there was no initial indicating the medications were given.

Resident 4

A Resident Characteristic Roster, dated 03/05/2025, showed the ALF admitted Resident 3 on [REDACTED]/2024 and Resident 3 required medication assistance.

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Statement of Deficiencies	License #: 2276	Compliance Determination # 55814
Plan of Correction	Brookdale Stanwood	Completion Date
Page 4 of 4	Licensee: EMERITUS CORPORATION	05/14/2025

Review of Resident 3's February 2025 MAR showed Resident 3 was not given two medications on a regular schedule. The MAR showed that one of the medications was not documented as being given on 02/05/2025 and the other one was not documented as given on 02/06/2025 as there was no initial indicating the medications were given.

On 04/25/2025 at 11:06 AM, Staff C, Medication Technician, stated that there should not be blanks on the MAR.

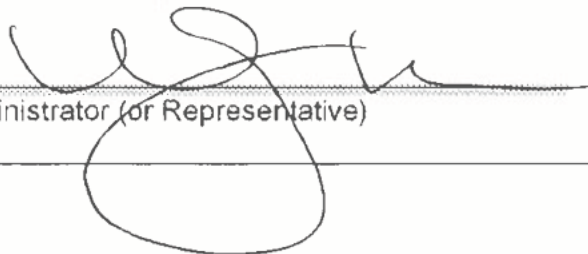
On 04/25/2025 at 11:08 AM, Staff B, Wellness Nurse, stated that it was unclear what took place on the dates the MARs were blank.

On 04/25/2025 at 11:08 AM, Staff A, West Division Operation Specialist, stated that staff should know not to leave blanks on the MAR.

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 Stanwood is or will be in compliance with this law and / or regulation on (Date) 6/20/25

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



Administrator (or Representative)

5/20/25

Date

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