



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Aegis Senior Communities LLC
Aegis of Queen Anne on Galer
223 W Galer St
Seattle, WA 98119

RE: Aegis of Queen Anne on Galer License # 2339

Dear Administrator:

This letter addresses Compliance Determination(s) 70597 (Completion Date 12/24/2025) and 66837 (Completion Date 10/29/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 12/24/2025 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-a, WAC 388-78A-2210-2-b, WAC 388-78A-2210-1-b, WAC 388-78A-2210-1, WAC 388-78A-2210-2

The Department staff who did the off-site verification:

Lisa Hauk, Complaint Investigator

If you have any questions, please contact me at (253)312-1446.

Sincerely,

Jamie Singer, Field Manager
Region 2, Unit J
Residential Care Services

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



Residential Care Services Investigation Summary Report

Provider/Facility: Aegis of Queen Anne on Galer
License/Cert.#: 2339
Compliance Determination #: 66837
Investigator: Lisa Hauk
Investigation Date(s): 10/07/2025 through 10/29/2025
Complainant Contact Date(s):

Provider Type: Assisted Living Facility
Intake ID: 194419
Region/Unit #: RCS Region 2 / Unit J

Allegation(s):

The Assisted Living Facility (ALF) staff made an error with the Named Resident's (NR) medications.

Investigation Methods:

Sample:	Total residents: 40 Resident sample size: 2 Closed records sample size: 0
Observations:	Identified resident Residents Resident care equipment Resident rooms Staff to resident interactions
Interviews:	Administration Identified resident Nursing staff Residents
Record Reviews:	Medical records Incident investigation Facility policies Personnel files Staff training records

Investigation Summary:

Interview and record review showed Named Staff #1 (NS1) was scheduled to pass medications at the ALF, but was late to work. NS2 prepared and gave medications to the NR because NS1 was late to work. NS2 did not document that medications were given to the NR. When NS1 arrived to work, NS1 prepared and gave medications to the NR a second time because NS1 was unaware NS2 had already given the NR medications. Failed practice identified. See written citation for WAC 388-78A-2210 (1)(a)(b)(2).

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 #: 2339	Compliance Determination # 66837
Plan of Correction	Aegis of Queen Anne on Galer	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 10/07/2025 of:

Aegis of Queen Anne on Galer
223 W Galer St
Seattle, WA 98119

This document references the following complaint number(s): 194419

The following sample was selected for review during the unannounced on-site visit: 2 of 40 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Lisa Hauk, Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit J
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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

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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

10/30/2025
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)

11/04/2025
Date

WAC 388-78A-2210 Medication services.

(1) An assisted living facility providing medication service, either directly or indirectly, must:

- (a) Meet the requirements of chapter 69.41 RCW Legend drugs Prescription drugs, and other applicable statutes and administrative rules; and
- (b) Develop and implement systems that support and promote safe medication service for each resident.

(2) The assisted living facility must ensure the following residents receive their medications as prescribed, except as provided for in WAC 388-78A-2230 and 388-78A-2250 :

- (b) If the assisted living facility provides medication administration services, each resident who requires medication administration and his or her negotiated service agreement indicates the assisted living facility will provide medication administration.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 1 of 2 residents (Resident 1) received medications as prescribed. This failure caused Resident 1 to receive a double dose of medication that resulted in cardiac monitoring at the hospital.

Findings included...

Record review of the ALF's Documentation Standards for Medication Policy, revised on 04/12/2021, showed that once staff had identified the right resident and had assisted or administered the medication to the resident, they would find the corresponding date and time on the electronic Medication Administration Record (eMAR) to document the

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medication had been given.

Record review of an undated Face Sheet, showed the ALF admitted Resident 1 on [REDACTED] /2022 with [REDACTED], and other disabling diagnoses. Review of an Individualized Service Plan (ISP – equivalent to a Negotiated Service Agreement), dated 06/14/2025, showed Resident 1 required medication assistance from staff.

Record review of Resident 1's September 2025 eMAR, showed physician's orders for several scheduled 8:00 am medications including: atorvastatin (for high cholesterol), bupropion (for dementia), Cerovite (a supplement), escitalopram (for dementia), ferrous sulfate (for anemia), finasteride (for lower urinary tract symptoms), florastor (probiotic), lisinopril (for HTN), metoprolol ER (extended release) (used for HTN and chest pain), propafenone (for A-fib), Reguloid (fiber supplement), tamsulosin (lower urinary tract symptoms).

Record review of a Medication Incident Report (MIR), dated 09/12/2025, showed Resident 1 received a double dose of AM medications on 09/12/2025. The MIR showed that Staff B (Medication Technician – MT) gave Resident 1's morning medications by memory, without documenting on the eMAR medications were given. The MIR stated, later in the shift, Staff C (MT) also gave Resident 1 their morning medications because they had not yet been documented as already given by Staff B. The MIR showed the ALF contacted Poison Control once the double dosing was discovered, and it was recommended Resident 1 go to the Emergency Room for cardiac monitoring.

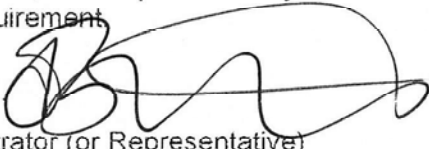
In interview on 10/07/2025 at 1:13 pm, Staff A (General Manager) confirmed Resident 1 received a double dose of medication because Staff B did not follow the policy and document as soon as medications were given.

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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, Aegis of Queen Anne on Galer is or will be in compliance with this law and / or regulation on (Date) 12/13/2025

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


Administrator (or Representative)

11/04/2025
Date