



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 MADISON
2200 E Madison St
Seattle, WA 98112

RE: AEGIS OF MADISON License # 2241

Dear Administrator:

This letter addresses Compliance Determination(s) 59411 (Completion Date 05/13/2025) and 55471 (Completion Date 03/24/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 05/13/2025 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-2240

The Department staff who did the on-site verification:
Cathy Prentice, 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 MADISON **Provider Type:** Assisted Living Facility
License/Cert.#: 2241
Compliance Determination #: 55471 **Intake ID:** 168737
Investigator: Cathy Prentice **Region/Unit #:** RCS Region 2 / Unit J
Investigation Date(s): 02/27/2025 through 03/24/2025
Complainant Contact Date(s): 02/24/2025, 03/24/2025

Allegation(s):

The Named Resident (NR) missed three doses of ordered blood pressure medication again due to facility not obtaining the medication when it ran out.

Investigation Methods:

Sample: Total residents: 86
Resident sample size: 3
Closed records sample size: 0

Observations: Named Resident (NR); delivery of care and services; staff interactions with residents; residents' appearance; environment.

Interviews: Named Resident, other residents, staff, administration, collateral contacts.

Record Reviews: Resident care records, Assessment, Negotiated Service Agreement (NSA), investigations, grievances, facility policies, other pertinent records.

Investigation Summary:

Observation, interview and record review showed, the facility completed an Assessment and Negotiated Service Agreement as required. The facility failed to have medication available for the NR which resulted in three days of missed doses of ordered blood pressure medication. See Statement of Deficiencies dated 03/24/2025.

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 #: 2241	Compliance Determination # 55471
Plan of Correction	AEGIS OF MADISON	Completion Date
Page 1 of 3	Licensee: Aegis Senior Communities LLC	03/24/2025

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 02/27/2025 and 03/21/2025 of:

AEGIS OF MADISON
2200 E Madison St
Seattle, WA 98112

This document references the following complaint number(s): 168737, 170110

The following sample was selected for review during the unannounced on-site visit: 3 of 86 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Cathy Prentice, 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

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Statement of Deficiencies	License #: 2241	Compliance Determination # 55471
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Page 2 of 3	Licensee: Aegis Senior Communities LLC	03/24/2025

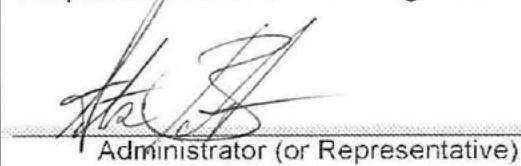
As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.


Residential Care Services

3/25/2025

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)

4/10/2025

Date

WAC 388-78A-2240 Nonavailability of medications. When the assisted living facility has assumed responsibility for obtaining a resident's prescribed medications, the assisted living facility must obtain them in a correct and timely manner.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure that 1 of 3 sampled residents (Resident 1) had prescribed medications available in the facility. This failure resulted in Resident 1 missing doses of physician ordered medication for blood pressure.

Findings included...

Review of the ALF's policy for unavailable medications, dated 02/19/2025, showed each night a nurse completed a review of the day prior for any medications marked as unavailable and any actions taken/follow up needed; medication counts were done twice weekly by the medication technicians; nurses were to be notified if a resident had less than 14 day supply and nurse reordered and/or worked with the physician for a refill order; nurses also checked medication count weekly for residents who used an outside pharmacy; pharmacies in close proximity were to be used for emergency refills if needed and paid for by the facility.

NOTE: According to Medlineplus.gov, Eplerenone is used alone or in combination with other medications to treat high blood pressure. High blood pressure is a common condition and when not treated, can cause damage to the brain, heart, blood vessels, kidneys and other parts of the body. Damage to these organs may cause heart disease, a heart attack, heart failure, stroke, kidney failure, loss of vision, and other problems. Take eplerenone exactly as directed.

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Record review of a Face Sheet, showed the ALF admitted Resident 1 on [REDACTED] /2023 with diagnoses of [REDACTED] and [REDACTED].

Review of an Individualized Service Plan (ISP- equivalent to Individualized Negotiated Service Agreement), dated 05/08/2023, showed the ALF managed and assisted with Resident 1's medications that were supplied by a non-preferred pharmacy. The ISP showed staff would order emergency supply from community preferred pharmacy if medication was not delivered in a timely manner from an outside pharmacy.

Review of the Medication Administration Record (MAR) for February 2025, showed Resident 1 did not receive physician's prescribed daily Eplerenone on three occasions: 02/22/2025; 02/23/2025, 02/24/2025 due to medication not being available.

In an interview, on 02/17/2025 at 9:10 AM, Staff A (Licensed Nurse) stated she called the pharmacy when the staff reported Resident 1's medication ran out and the pharmacy stated the medication would be sent at the end of the month. Staff A stated she did nothing further to obtain Eplerenone for Resident 1.

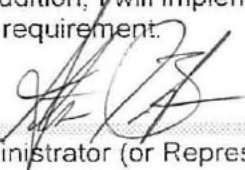
In an interview, on 03/19/2025 at 2:48 PM, Staff B (Health Services Director/Registered Nurse) stated the facility did not have Eplerenone available for Resident 1 when three doses were missed in February 2025. Staff B stated Staff A failed to follow facility procedures and obtain an emergency supply of the medication when the facility ran out.

This deficiency was previously cited on 01/15/2025.

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 MADISON is or will be in compliance with this law and / or regulation on (Date) 5/8/2025.

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


Administrator (or Representative)

4/10/2025
Date