



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

MARYSVILLE SPECIAL CARE COMMUNITY LLC
THE COTTAGES AT MARYSVILLE
1216 GROVE STREET
MARYSVILLE, WA 98270

RE: THE COTTAGES AT MARYSVILLE License # 2149

Dear Administrator:

This letter addresses Compliance Determination(s) 52405 (Completion Date 12/31/2024) and 47534 (Completion Date 11/05/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 12/31/2024 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-24701-1

The Department staff who did the off-site verification:
Karen Glover, Complaint Investigator

If you have any questions, please contact me at (360)651-6846.

Sincerely,

Kimberley Ripley, Field Manager
Region 2, Unit A
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: THE COTTAGES AT
MARYSVILLE

License/Cert.#: 2149

Compliance Determination #: 47534

Investigator: Karen Glover

Investigation Date(s): 09/20/2024 through 11/05/2024

Complainant Contact Date(s):

Provider Type: Assisted Living Facility

Intake ID: 144122

Region/Unit #: RCS Region 2 / Unit A

Allegation(s):

The Named Staff (NS) had some concerns about another staff member and stated they were angry. The NS had taken a picture, with their personal cell phone, of the Named Resident (NR) laying in bed with just a brief on.

Investigation Methods:

Sample:	Total residents: 42 Resident sample size: Closed records sample size:
Observations:	Residents Dining Resident rooms Staff to resident interactions
Interviews:	Family members Nursing staff Administration
Record Reviews:	Personnel files Incident investigation Facility policies

Investigation Summary:

The NR was found by the NS laying in bed with just a brief on. The NS took 3 pictures of the NR to show the licensed nurse (LN). The NR had been covered with a blanket until the NS removed it to take the pictures. The NR was non verbal and unable to give consent for the pictures. The NS refused to delete the pictures from their phone and was terminated. As the NS was leaving the facility they stated they would not be deleting the pictures. The facility did an investigation and notified family, medical provider and the department's hotline. The facility did an in-service on taking unauthorized pictures of residents and resident rights. Review of the NS background check showed the facility had a final fingerprint completed on 08/30/2022 that required a Character, Competence and Suitability (CCS) review. The facility staff had not completed the CCS review on the NS. The facility received a citation for WAC 388-78A-24701 Background checks-Employment-non

disqualifying information.

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 #: 2149	Compliance Determination # 47534
Plan of Correction	THE COTTAGES AT MARYSVILLE	Completion Date
Page 1 of 3	Licensee: MARYSVILLE SPECIAL CARE COMMUNITY LLC	11/05/2024

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 09/20/2024 and 09/20/2024 of:

THE COTTAGES AT MARYSVILLE
1216 GROVE STREET
MARYSVILLE, WA 98270

This document references the following complaint number(s): 144122, 144576, 147045

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

The department staff that investigated the Assisted Living Facility:

Karen Glover, Complaint Investigator

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

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

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.

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

Administrator (or Representative)

Date

WAC 388-78A-24701 Background checks Employment Nondisqualifying information.

(1) If the background check results show that an employee or prospective employee has a criminal conviction or pending charge for a crime that is not a disqualifying crime under chapter 388-113 WAC, then the assisted living facility must determine whether the person has the character, competence and suitability to work with vulnerable adults in long-term care.

This requirement was not met as evidenced by:

Based on interview and record review the Assisted Living Facility (ALF) failed to ensure a staff member with reported information on a fingerprint background check had a Character, Competence and Suitability review completed. The failure resulted in a staff member being hired, with no review being completed to identify if the staff member was suitable to work with vulnerable adults.

Findings included...

Record review of a Final Fingerprint Background Check Result dated 08/20/2022 showed Staff C, Caregiver, had "information reported by one or more background check sources that requires a Character, Competence and Suitability review."

On 09/23/2024 at 2:39 PM, Staff A, Executive Director, stated that they did not complete a Character, Competence and Suitability review form for Staff C. Staff A stated the background check came back with no records attached to review.

On 11/05/2024 at 08:47 AM, in an email from the Background Check Central Unit (BCCU), they stated the reason there was no record to review was because it was a Federal Bureau of Investigation (FBI) record, and that information needed to be provided to the ALF by the applicant.

Plan/Attestation Statement

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

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, THE COTTAGES AT MARYSVILLE 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