



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

Terry Care Group, LLC  
Murano Senior Living  
620 Terry Ave  
Seattle, WA 98104

RE: Murano Senior Living License # 2521

Dear Administrator:

This letter addresses Compliance Determination(s) 38587 (Completion Date 03/20/2024) and 37247 (Completion Date 02/26/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 03/20/2024 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-2600-2-a

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:** Murano Senior Living  
**License/Cert.#:** 2521

**Provider Type:** Assisted Living Facility

**Compliance Determination #:** 37247

**Intake ID:** 118439

**Investigator:** Cathy Prentice

**Region/Unit #:** RCS Region 2 / Unit J

**Investigation Date(s):** 02/23/2024 through 02/26/2024

**Complainant Contact Date(s):**

### Allegation(s):

The named resident made an allegation of abuse against a caregiver saying the caregiver raped her with a newspaper.

### Investigation Methods:

|                        |                                                                                                                                    |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sample:</b>         | Total residents: 68<br>Resident sample size: 3<br>Closed records sample size: 0                                                    |
| <b>Observations:</b>   | Named resident; delivery of care and services; staff interactions with residents; residents' appearance.                           |
| <b>Interviews:</b>     | Named resident, other residents, staff, administration.                                                                            |
| <b>Record Reviews:</b> | Resident care records, Assessment, Negotiated Service Agreement (NSA), investigations, facility policies, other pertinent records. |

### Investigation Summary:

The facility conducted an investigation ruling out abuse and neglect and notified all appropriate parties. According to interview and record review, the facility failed to implement their policy for protecting residents during abuse investigations when the facility did not remove the accused caregiver from resident care after the named resident made the abuse allegation and pending investigation.

### 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 #: 2521                 | Compliance Determination # 37247 |
| Plan of Correction        | Murano Senior Living            | Completion Date                  |
| Page 1 of 3               | Licensee: Terry Care Group, LLC | 02/26/2024                       |

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 02/23/2024 and 02/23/2024 of:

Murano Senior Living  
620 Terry Ave  
Seattle, WA 98104

This document references the following complaint number(s): 118439

The following sample was selected for review during the unannounced on-site visit: 3 of 68 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

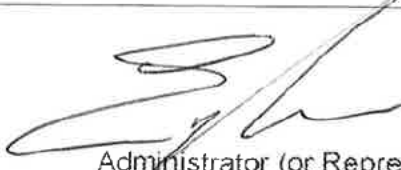
As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

  
Residential Care Services

2/27/2024  
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)  
**ERIC PICKARTZ**

Date

3/6/24

**WAC 388-78A-2600 Policies and procedures.**

(2) The assisted living facility must develop, implement and train staff persons on policies and procedures to address what staff persons must do:

(a) Related to suspected abandonment, abuse, neglect, exploitation, or financial exploitation of any resident;

**This requirement was not met as evidenced by:**

Based on interview and record review, the Assisted Living facility (ALF) failed to implement their policy regarding an alleged perpetrator during an abuse investigation for 1 of 1 residents (Resident 1). This failure placed Resident 1 and 21 Memory Care Unit residents at risk for abuse.

Findings included...

NOTE: Washington Administrative Code (WAC) 388-78A-2371 -Investigations - states during abuse investigations the assisted living facility must: (4) Protect residents during the course of the investigation.

Review of the facility policy, Suspected Abuse of Residents and Team Members, updated 01/31/2024, showed if the alleged perpetrator in an abuse allegation is a team member, they are to be immediately placed on administrative leave pending the outcome of the investigation and escorted out of the community.

Review of facility records showed the ALF admitted Resident 1 on [REDACTED]/2022 with a diagnosis of [REDACTED]

Review of an Incident Investigation Document (IID), dated 02/01/2024, showed Resident 1 reported she had been raped by a worker at the facility. The IID showed Resident 1 identified Staff A (Caregiver and Medication Technician) as the perpetrator. The IID stated the facility removed Staff A from providing direct care to Resident however Staff A was not suspended during the investigation, and provided direct care for other residents. The IID showed Staff A provided resident care during the abuse allegation investigation.

Review of ALF timecard data showed Staff A worked as a caregiver on 02/01/2024, 02/02/2024, 02/06/2024, 02/07/2024 and 02/08/2024.

In an interview, on 02/23/2024 at 10:45 AM, Staff A stated she continued giving medications to Resident 1 as well as provided direct care for other residents on the MCU on 02/01/2024. Staff A also confirmed she worked four more shifts during the ALF's investigation and was not suspended from resident care.

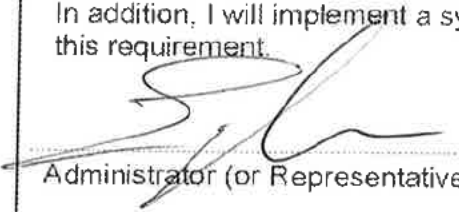
In an interview, on 02/23/2024 at 10:00 AM, Staff B (Administrator) stated he was not aware alleged perpetrators required suspension during an investigation. Staff B confirmed Staff A had not been suspended.

In an interview, on 02/26/2024 at 11:00 AM, Staff C (Director of MCU) stated she received the abuse allegation on 02/01/2024 and conducted an investigation through 02/09/2024. Staff C confirmed Staff A was not suspended during the course of the investigation.

**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, Murano Senior Living is or will be in compliance with this law and / or regulation on (Date) 3/15/24.

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

  
Administrator (or Representative)3/6/24  
Date