



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

CRISTA MINISTRIES INC
COURTYARD AT CRISTA SHORES
1600 NW CRISTA SHORES LANE
SILVERDALE, WA 98383

RE: COURTYARD AT CRISTA SHORES License # 1041

Dear Administrator:

This letter addresses Compliance Determination(s) 63075 (Completion Date 07/24/2025) and 58380 (Completion Date 05/06/2025).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/24/2025 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-2474, WAC 388-78A-2474-1, WAC 388-78A-2474-2, WAC 388-78A-2474-2-e, WAC 388-78A-2474-5, WAC 388-78A-2474-6

The Department staff who did the off-site verification:

Cathleen Davis, ALF Licenser

Melisa Moran, Assisted Living Facility Nursing Consultant Institutional

If you have any questions, please contact me at (253)442-3013.

Sincerely,

Manfay Chan, Allied Health Field Manager
Region 3, Unit D
Residential Care Services

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05.09.2025 16:49:10

State of Washington

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STATE OF WASHINGTON
 DEPARTMENT OF SOCIAL AND HEALTH SERVICES
 AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Statement of Deficiencies	License #: 1041	Compliance Determination # 58380
Plan of Correction	COURTYARD AT CRISTA SHORES	Completion Date
Page 1 of 5	Licensee: CRISTA MINISTRIES INC	05/06/2025

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 the unannounced on-site full inspection on 04/22/2025 and 04/28/2025 of:

COURTYARD AT CRISTA SHORES
 1600 NW CRISTA SHORES LANE
 SILVERDALE, WA 98383

The following sample was selected for review during the unannounced on-site visit: 9 of 51 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Cathleen Davis, ALF Licenser
 Melisa Moran, Assisted Living Facility Nursing Consultant Institutional

From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 3, Unit D
 PO Box 99250
 Lakewood, WA 98496

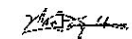
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As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.


Residential Care Services

05/09/2025

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)

5/13/2025
Date

WAC 388-78A-2474 Training and home care aide certification requirements.

(1) The assisted living facility must ensure staff persons hired before January 7, 2012 meet training requirements in effect on the date hired, including requirements in chapter 388-112A WAC.

(2) The assisted living facility must ensure all assisted living facility administrators, or their designees, and caregivers hired on or after January 7, 2012 meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(e) Continuing education.

(5) Under RCW 18.88B.041 and chapter 246-980 WAC, certain individuals including registered nurses, licensed practical nurses, certified nursing assistants, or persons who are in an approved certified nursing assistant training program are exempt from long-term care worker basic training requirements. Continuing education requirements under chapter 388-112A WAC still apply to these individuals, except for registered nurses and licensed practical nurses.

(6) For the purpose of this section, the term "caregiver" has the same meaning as the term "long-term care worker" as defined in RCW 74.39A.009.

This requirement was not met as evidenced by:

Based on interview and record review, the Assisted Living Facility (ALF) failed to ensure 2 of 6 sampled Staff (Staff B and C) completed their required annual twelve hours of continuing education training. This failure placed 51 of 51 residents at risk of having received care from unqualified and untrained staff.

Findings included...

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WAC 388-112A-0600

What is continuing education and what topics may be covered in continuing education?

(1) Continuing education is annual training designed to promote professional development and increase a long-term care worker's knowledge, expertise, and skills. DSHS must approve continuing education curricula and instructors.

(2) The same continuing education course must not be repeated for credit unless it is a new or more advanced training on the same topic. However, a long-term care worker may repeat up to five credit hours per year on the following topics:

- (a) Bloodborne pathogens and infection control;
- (b) CPR training;
- (c) First-aid training;
- (d) Food handling training;
- (e) Health insurance portability and accountability act (HIPAA);
- (f) Medication assistance;
- (g) Disaster preparedness;
- (h) Aging sensitivity;
- (i) Resident rights as it relates to caregiving issues in chapter 70.129 RCW;
- (j) Resident safety;
- (k) Abuse and neglect identification and mandatory reporting; and
- (l) Topics where the assisted living facility, enhanced services facility, or adult family home can demonstrate a need for retraining.

(3) Continuing education must be on a topic relevant to the care setting, care needs of residents, or long-term care worker career development. In addition to the topics listed in subsection (1) of this section, topics or course may include.

- (a) Personal care services;
- (b) Mental illness;
- (c) Dementia;
- (d) Developmental disabilities;
- (e) Depression;
- (f) Communication skills;
- (g) Positive resident behavior support;
- (h) Developing or improving resident centered activities;
- (i) Dealing with wandering or aggressive resident behaviors;
- (j) Deescalating challenging behaviors; and
- (k) Medical conditions.

(4) Nurse delegation core and nurse delegation specialized diabetes training hours when not applied to basic training hours may count towards continuing education.

(5) Specialty training, except if completed through a challenge test, may be used to meet continuing education requirements.

(6) When hours from a class approved as specialty training are counted toward basic training requirements, the hours must not be counted toward continuing education.

(7) Residential care administrator training under WAC 388-112A-0600 may be used to meet the continuing education requirements described in WAC 388-112A-0610 during the year it was completed.

(8) Successful completion of a department of health approved home care aide certified alternative bridge program may be applied up to twelve hours of continuing education in the year it was completed.

WAC 388-112A-0611

Who in an assisted living facility is required to complete continuing education training each year, how many hours of continuing education are required, and when must they

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be completed?

(1) The continuing education training requirements that apply to certain individuals working in assisted living facilities are described in this section.

(a) The following long-term care workers must complete 12 hours of continuing education by their birthday each year:

(i) A certified home care aide;

(ii) A long-term care worker who is exempt from the 70-hour home care aide basic training under WAC 388-112A-0090 (1) and (2);

(iii) A certified nursing assistant;

(iv) A person with special education training and an endorsement granted by the Washington state office of superintendent of public instruction, as described in RCW 28A.300.010; and

(v) An assisted living facility administrator or the administrator designee as provided under WAC 388-112A-0060.

(b) A long-term care worker, who is a certified home care aide must comply with continuing education requirements under chapter 246-980 WAC.

(c) The continuing education requirements of this section do not apply to a registered nurse, a licensed practical nurse, and an advanced registered nurse practitioner licensed under chapter 18.79 or 18.80 RCW, even if voluntarily certified as a home care aide under chapter 18.88B RCW.

(d) If exempt from certification under RCW 18.88B.041, a long-term care worker must complete and provide documentation of 12 hours of continuing education within 45 calendar days of being hired by the assisted living facility or by the long-term care worker's birthday in the calendar year hired, whichever is later; and

(i) Must complete 12 hours of continuing education by the long-term care worker's birthday each calendar year worked thereafter; or

(ii) If the 45 calendar day time period allows the long-term care worker to complete continuing education in January or February of the following year, the credit hours earned will be applied to the calendar year in which the long-term care worker was hired.

(e) If the birthday following initial certification as a home care aide or nursing assistant (NA-C) is less than a full year from the date of initial certification, no continuing education will be due for the first renewal period.

(2) A long-term care worker who does not complete continuing education as required under this chapter must not provide care until the required continuing education is completed.

<Staff B>

Record review of the staff roster dated 04/22/2025, showed Staff B, Nursing Assistant Certified (NAC), was hired by the ALF on 12/10/2024. Staff B's personnel file did not show completion of the required annual twelve hours of continuing education classes due on 12/22/2024.

<Staff C>

Record review of staff roster printed 04/22/2025, showed Staff C, Medication Technician-Lead, was hired by the ALF on 07/01/2024. Staff C's personnel file did not

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show completion of the required annual twelve hours of continuing education classes due 05/21/2024.

In an interview on 04/24/2025 at 10:45 AM Staff A, Executive Director, confirmed Staff B and Staff C had not completed the required twelve hours of continuing education classes. Staff A reported that both Staff B and Staff C believed they had completed the training while working at a previous facility but were unable to obtain copies of continuing education documents.

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, COURTYARD AT CRISTA SHORES is or will be in compliance with this law and / or regulation on
(Date) 5/31/2025.

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



Administrator (or Representative)

5/13/2025

Date

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COURTYARD AT CRISTA SHORES
1600 NW CRISTA SHORES LANE
SILVERDALE, WA 98383

RE: COURTYARD AT CRISTA SHORES # 1041

Dear Administrator:

The Department completed a full inspection of your Assisted Living Facility on 05/06/2025 and found that your facility does not meet the Assisted Living Facility requirements.

The Department:

- Wrote the enclosed report; and
- May take licensing enforcement action based on many deficiency listed on the enclosed report; and
- May inspect your program to determine if you have corrected all deficiencies; and
- Expects all deficiencies to be corrected within the timeframe accepted by the department.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately;
- Contact the Field Manager for clarifications related to the Statement of Deficiencies (SOD);
- Within 10 calendar days after you receive this letter, complete and return the enclosed 'Plan/Attestation Statement';
 - o Sign and date the enclosed report;
 - o For each deficiency, indicate the date you have or will correct each deficiency;
 - o Return the Plan/Attestation Statement and report with signatures to:

Manfay Chan, Allied Health Field Manager
Residential Care Services
Region 3, Unit D
Preferred methods:

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

eFax: (253) 589-7240

Email: rcsregion3email@dshs.wa.gov

Optional method:

PO Box 99250

Lakewood, WA 98496

- Complete correction(s) within 45 days, or sooner if directed by the Department, after review of your proposed correction dates.
- Have your plan approved by the Department.

Consultation(s):

In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

WAC 246-215-03500 Temperature and time control Frozen food (FDA Food Code 3-501.11). Stored frozen foods must be maintained frozen.

WAC 246-215-03520 Temperature and time control Cooling methods (FDA Food Code 3-501.15).

WAC 246-215-03525 Temperature and time control Time/temperature control for safety food, hot and cold holding (FDA Food Code 3-501.16).

WAC 388-78A-2305 Food sanitation. The assisted living facility must:

(1) Manage food, and maintain any on-site food service facilities in compliance with chapter 246-215 WAC, Food service;

Observation of hot food in steam tray served after being transported in a cold food open rack. The baked ham, macaroni and cheese entree served on 04/25/2025 at 11:10 AM showed a temperature reading 179 degrees, while inside the steam tray. This deficiency was corrected onsite when the Chef directed food staff to transport all hot food in hot carts to and from the kitchen to the ALF dining room.

WAC 388-78A-2620 Pets. If an assisted living facility allows pets to live on the premises, the assisted living facility must:

(2) Ensure animals living on the assisted living facility premises:

(a) Have regular examinations and immunizations, appropriate for the species, by a veterinarian licensed in Washington state;

(b) Are certified by a veterinarian to be free of diseases transmittable to humans;

Record review of veterinary examination showed feline examination dated 03/13/2023. In an interview with pet owner the feline visits the facility intermittently and does not live onsite full time. This deficiency was corrected during the inspection when facility staff by providing an updated examination for the feline on 04/25/2025.

WAC 388-78A-2950 Water supply. The assisted living facility must:

(6) Provide all sinks in resident rooms, toilet rooms and bathrooms, and bathing fixtures used by residents with hot water between 105 F and 120 F at all times; and

Observation of the Assisted Living Facility (ALF) showed that hot water temperatures in 3 of 9 sampled resident rooms were not maintained between 105 degrees Fahrenheit (F) and 120 degrees F. The ALF reported they had a breaker that flipped, and this was fixed and remedied while on site by maintenance, and a recheck of hot water temperatures found them to be within the required range.

You Are Not:

- Required to submit a plan of correction for the consultation deficiency or deficiencies stated in this letter and not listed on the enclosed report.

You May:

- Contact me for clarification of the deficiency or deficiencies found.

In Addition, You May:

- Request an **Informal Dispute Resolution (IDR)** review within 10 working days after you receive this letter. Your IDR request **must** include:
 - o What specific deficiency or deficiencies you disagree with;
 - o Why you disagree with each deficiency; and
 - o Whether you want an IDR to occur in-person, by telephone or as a paper review.
 - o Send your request to:

Email: RCSIDR@dshs.wa.gov; or

Fax: (360) 725-3225

If You Have Any Questions:

- Please contact me at (253)442-3013.

Sincerely,



Manfay Chan, Allied Health Field Manager
Region 3, Unit D
Residential Care Services

Enclosure