



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave Ste 200, Vancouver, WA 98684

Centralia Point Operating Company LLC
Centralia Point Assisted Living and Memory Care
2010 Cooks Hill Rd
Centralia, WA 98531

RE: Centralia Point Assisted Living and Memory Care License # 2609

Dear Administrator:

This letter addresses Compliance Determination(s) 46630 (Completion Date 09/04/2024) and 43233 (Completion Date 06/26/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 09/04/2024 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-2305-1

The Department staff who did the on-site verification:
Anissa Bearden, Licensors
Emily Boniface, Community Program Nurse Licensors

If you have any questions, please contact me at (253)254-3190.

Sincerely,

Cory Cisneros

Cory Cisneros, Field Manager
Region 3, Unit E
Residential Care Services



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave Ste 200, Vancouver, WA 98684

Statement of Deficiencies	License #: 2609	Compliance Determination # 43233
Plan of Correction	Centralia Point Assisted Living and Memory Care	Completion Date
Page 1 of 8	Licensee: Centralia Point Operating Company LLC	06/26/2024

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 off-site follow-up on 05/30/2024 and 06/26/2024 of:

Centralia Point Assisted Living and Memory Care
2010 Cooks Hill Rd
Centralia, WA 98531

This document references the following SOD dated: 06/26/2024

The following sample was selected for review during the unannounced off-site verification: 7 of 50 current residents and 0 former residents.

The department staff that inspected the Assisted Living Facility:

Celeste Vashey, ALF LTC Licenser

From:

DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3, Unit E
800 NE 136th Ave Ste 200
Vancouver, WA 98684

As a result of the off-site verification(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.

Cory Cisneros

Residential Care Services

07/10/2024

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.

Brycen Beun
Administrator (or Representative)

07/18/2024
Date

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;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the facility failed to implement safe food handling, labeling, storing practices, proper logs, and proper hand hygiene for 1 of 1 kitchen reviewed. These failures placed 50 of 50 residents at risk for receiving food that was not safely handled and at risk for exposure to food-borne illnesses.

Findings included...

WAC 246-215-03526

"Temperature and time control—Ready-to-eat, time/temperature control for safety food, date marking (FDA Food Code 3-501.17).

(1) Except when packaging food using a reduced oxygen packaging method as specified under WAC 246-215-03540, and except as specified in subsections (5) and (6) of this section, refrigerated, ready-to-eat, time/temperature control for safety food prepared and held in a food establishment for more than twenty-four hours must be clearly marked to indicate the date or day by which the food must be consumed on the premises, sold, or discarded when held at a temperature of 41°F (5°C) or less for a maximum of seven days. The day of preparation must be counted as day one.

(2) Except as specified in subsections (5) through (7) of this section, refrigerated, ready-to-eat, time/temperature control for safety food prepared and packaged by a food processing plant must be clearly marked, at the time the original container is opened in a food establishment and if the food is held for more than twenty-four hours, to indicate the date or day by which the food must be consumed on the premises, sold, or discarded, based on the temperature and time requirements specified in subsection (1) of this section and:

(a) The day the original container is opened in the food establishment is counted as day one; and

(b) The day or date marked by the food establishment may not exceed a manufacturer's use-by date if the manufacturer determined the use-by date based on food safety.

(3) A refrigerated, ready-to-eat, time/temperature control for safety food ingredient or a portion of a refrigerated, ready-to-eat, time/temperature control for safety food that is combined with additional ingredients or portions of food must retain the date marking of the earliest-prepared or first-prepared ingredient.

(4) A date marking system that meets the criteria stated in subsections (1) and (2) of this section may include:

(a) Using a method approved by the regulatory authority for refrigerated, ready-to-eat, time/temperature control for safety food that is frequently rewrapped, such as lunch meat

or a roast, or for which date marking is impractical, such as soft-serve mix or milk in a dispensing machine;

(b) Marking the date or day of preparation, with a procedure to discard the food on or before the last date or day by which the food must be consumed on the premises, sold, or discarded as specified under subsection (1) of this section;

(c) Marking the date or day the original container is opened in a food establishment, with a procedure to discard the food on or before the last date or day by which the food must be consumed on the premises, sold, or discarded as specified under subsection (2) of this section; or

(d) Using calendar dates, days of the week, color-coded marks, or other effective marking methods, provided that the marking system is disclosed to the regulatory authority upon request."

WAC 246-215-03351

"Preventing contamination from the premises—Food storage (FDA Food Code 3-305.11).

(1) Except as specified in subsections (2) and (3) of this section, food must be protected from contamination by storing the food:

(a) In a clean, dry location;

(b) Where it is not exposed to splash, dust, or other contamination; and

(c) At least six inches (15 cm) above the floor.

(2) food in packages and working containers may be stored less than six inches (15 cm) above the floor on case lot handling equipment as specified under WAC 246-215-04268.

(3) Pressurized beverage containers, cased food in waterproof containers such as bottles or cans, and milk containers in plastic crates may be stored on a floor that is clean and not exposed to floor moisture."

WAC 246-215-04555

"Equipment—Mechanical ware washing equipment, hot water sanitization temperatures (FDA Food Code 4-501.112).

(1) Except as specified in subsection (2) of this section, in a mechanical operation, the temperature of the fresh hot water sanitizing rinse as it enters the manifold may not be more than 194°F (90°C) or less than:

(a) For a stationary rack, single temperature machine, 165°F (74°C); or

(b) For all other machines, 180°F (82°C).

(2) The maximum temperature specified under subsection (1) of this section, does not apply to the high pressure and temperature systems with wand-type, hand-held, spraying devices used for the in-place cleaning and sanitizing of equipment such as meat saws."

WAC 246-215-03505

"Temperature and time control—Time/temperature control for safety food, slacking (FDA Food Code 3-501.12). Frozen Time/temperature control for safety food that is slacked to moderate the temperature must be held: (1) Under refrigeration that maintains the food temperature at 41°F (5°C) for less; or (2) At any temperature if the food remains frozen."

WAC 246-215-03510

"Temperature and time control—Thawing (FDA Food Code 3-501.13).

Except as specified in subsection (4) of this section, time/temperature control for safety food must be thawed:

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- (1) Under refrigeration that maintains the food temperature at 41°F (5°C) or less; or
- (2) Completely submerged under running water:
- (b) With sufficient water velocity to agitate and float off loose particles in an overflow..."

WAC 246-215-02310

"Hands and arms—When to wash (FDA Food Code 2-301.14). FOOD EMPLOYEES shall clean their hands and exposed portions of their arms as specified under WAC 246-215-02305 immediately before engaging in FOOD preparation including working with exposed FOOD, clean EQUIPMENT and UTENSILS, and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES and: (1) After touching bare human body parts other than clean hands and clean, exposed portions of arms; (4) Except as specified under WAC 246-215-02400(2), after coughing, sneezing, using a handkerchief or disposable tissue, using tobacco, eating, or drinking; (5) After handling soiled EQUIPMENT or UTENSILS; (6) During FOOD preparation, as often as necessary to remove soil and contamination and to prevent cross contamination when changing tasks; (7) When switching between working with raw FOOD and working with READY-TO-EAT FOOD; (8) Before donning gloves for working with READY-TO-EAT FOOD unless a glove change is not the result of contamination; and (9) After engaging in other activities that contaminate the hands or gloves.

WAC 246-215-03300

"Preventing contamination by employees—Preventing contamination from hands (FDA Food Code 3-301.11). (1) FOOD EMPLOYEES shall wash their hands as specified under WAC 246-215-02305."

Record review of the "Department of Social and Health Services" document, completion date 05/08/2024, showed the facility was out of compliance with WAC 388 78A 2305 Food sanitation. Staff A, Executive Director, signed the Plan/Attestation Statement saying the facility would be back in compliance by 05/31/2024.

Record review of the facility's policy titled, "Food Services-Preparation, Serving, Sanitation", dated 07/29/2021, showed food would be protected from contamination by it being covered with tightly fitted covers. Food would be stored above floor level to prevent contamination. Food would be labeled when removed from the original container. All food would be properly thawed. Potentially Hazardous Foods (PHF) that needed to be kept hot or cold for safety would be. Milk was a PHF. Cleaning, washing, and sanitizing equipment and utensils showed the sanitizing rinse solution should be at the proper temperature and concentration for proper time or correct manual dishwashing procedures.

Record review of the facility's policy titled, "Handwashing", undated, showed hand washing was the most important measure to prevent spread of infection and disease. All staff were responsible to carry out the hand washing policy. Dietary employee's hands must be washed at the kitchen sink upon reentry in the kitchen and before they handled food.

Labeling/Expired Foods

In an observation on 05/31/2024 at 9:21 AM, inside the kitchen refrigerator showed a rectangular container of red Jello that had plastic wrap that partially covered the substance

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whereas the rest of it was opened to air. There was no label to review of when the Jello was made and when it expired. Inside the refrigerator had "Tuna Cass 05/30" that was not covered and was open to air.

In an observation on 05/31/2024 at 9:23 AM, inside the kitchen pantry showed a bag of brown sugar that was opened to air and laid down horizontally. The brown sugar spilled out of the bag onto the pantry floor. There were two white plastic containers that were not labeled or dated. Both containers had white unknown substances inside. There was an opened package of Aju mix that did not have a label of when it was opened or expired. A part of the Aju label was torn off and an expiration date could not be found. There was a package of Krusteaz pancake buttermilk mix that had been opened. The package was rolled up, it did not have a label of when it was opened or when it expired to review. There was a green bowl that had eleven individually wrapped croutons that expired on 05/15/2024. There were two 5-pound bags of tortilla chips that expired 05/03/2024. There was a bottle of Molasses that showed the best by date was 11/12/2022. There was no label to review of when it had been opened. There were 3 packages of cereal that had been opened to air. The cereal did not have labels of when they were opened or when they expired. There was 1 package of raisin bran cereal that was opened and had a "prep date 12/2023".

In an observation on 06/03/2024 at 8:59 AM, inside of the kitchen pantry showed a bag of opened white bread that did not have a label of when it was opened or when it expired. Inside the kitchen pantry showed a container of baking powder that was opened to air. The baking powder had an unrecognizable date on the container. There was a container of baking soda that was opened to air. There was not a label to review of when it had been opened or expired. Inside a container labeled eggs were 13 individually wrapped fortune cookies that did not have a label of when they were opened or expired. Inside the kitchen on top of the microwave were 3 containers of peanut butter. 2 of 3 containers of peanut butter had brown crusted substances around the edges of the lids. There were no labels to review of when the items were opened and when they expired.

In an observation and interview on 06/04/2024 at 10:43 AM, Staff J, Cook, said sometimes facility staff members purchased food items for events for the residents. Staff J opened the refrigerator and said the container of strawberries that was not labeled or dated was from an event. Staff J said they planned to throw the strawberries away because they did not know how to incorporate it into the current menu.

In an interview on 06/04/2024 at 10:43 AM, Staff J, said every food item in the kitchen was supposed to be labeled. Staff J said they used stickers and wrote what the item was and when it had been opened on the sticker. Staff J said they do not include when the food expired on the label. Staff J said if a food did not have a lid, then all food was supposed to be covered in saran wrap. Staff J said prepared drinks expired within 3 days. Staff J said they were not sure when cereal expired and then said when it went stale.

Improperly Stored Foods

In an observation and interview on 05/30/2024 at 1:33 PM, Staff E, Cook, said the kitchen did not have a current food service director who was in charge. Staff E said they received a

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food delivery earlier in the day and they were working on putting the boxes in the freezer. On the ground next to the refrigerator walk in showed 7 white and brown boxes stacked on top of each other.

In an observation on 05/31/2024 at 9:23 AM, inside the kitchen pantry on the ground showed there were two boxes of tomato sauces totaling 22 cans that were stacked on top of each other. On the ground was a box labeled tropical fruit salad that had 3 other boxes stacked on top of it. On the ground showed there was an opened 10 pound bag of durum wheat semolina pasta.

In an interview on 06/04/2024 at 10:43 AM, Staff J said food could not be stored on the ground. Staff J said the facility kitchen was not set up well and they did not have adequate storage space which led to food being stored on the ground. Staff J said they had to stack boxes in the refrigerator and had to move them often to get into the freezer. Staff J said the freezer was small and items had to be stored on the floor. Staff J said they were looking for a structure that would allow the food currently on the floor to be raised off the floor.

Food Temperatures

In an interview on 05/30/2024 at 12:32 PM, Staff A, Executive Director, said mealtimes were at 8:00 AM, 12:00 PM, and 5:00 PM.

In a group interview on 05/31/2024 at 10:00 AM, fourteen residents at the facility collectively reported they had concerns regarding the food that was served at the facility. Resident 19 (R19) reported that the food temperature fluctuated, and hot foods were not always served hot and cold foods were not always served cold. Resident 17 (R17) said food that was supposed to be served cold was warm. Resident 5 (R5) said hot food were rarely served hot.

In an observation and interview on 06/03/2024 at 9:13 AM, inside the kitchen on the food line showed a gallon of milk that was $\frac{1}{4}$ full and had an expiration date of 05/09/2024. Staff K, Dietary Aide, said the gallon of milk was from breakfast and they needed to put it away. Staff K acknowledged the milk expired and threw it away.

In an observation on 06/03/2024 at 11:56 AM – 12:26 PM, inside the dining room showed on a rolling cart and dining room counter were 2 gallons of milk, 3 containers of orange juice, 1 pitcher of fruit punch with the date "5/31" on it, 1 pitcher of black cherry, 1 container of V-8 vegetable juice with the date "5/21", and 1 pitcher of lemonade with the date "05/31" on it. Next to the drinks was a bucket of ice with an ice scooper. None of the drinks were in or on a cooling mechanism to keep their temperature from rising.

In an interview and observation on 06/04/2024 at 10:50 AM, Staff J, Cook said the hot plate warmer in the kitchen did not work. Staff J said because the plate warmer had been broken, they kept plates on the food line. Staff J said food was supposed to go on the food line, but they needed to put resident plates there to try and keep food warm. Observation

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of the food line showed stacked plates in the compartment on the food line. Staff J said the hot plate warmer had been broken since they were hired on 05/01/2024. Staff J said getting food out to the residents at proper temperature was a challenge. Staff J said to keep cold items cold and below 36 degrees they kept ice underneath food and drinks that were outside of the refrigerator.

Defrosting Food

In an observation and interview on 06/04/2024 at 10:43 AM, in the kitchen showed the sink next to the dishwasher faucet had been on and running. At 11:08 AM, the faucet was still running and underneath it was a 6-inch container of raw chicken that had been frozen together. Half of the chicken was partially submerged in water whereas the other half floating above the water. Part of the chicken was in a plastic bag. The bags seal had been broken and water was inside the bag of chicken and the chicken was opened to air. Staff J said they did not have time to defrost the chicken in the refrigerator, so they placed it in a container with running cold water over it. Staff J attempted to separate the chicken from each other and could not do so. Staff J acknowledged the plastic bag protecting the chicken had ripped and water was inside of the bag. Staff J said they needed to talk to Staff A about how much they ordered at one time because now they had to cook an entire box of chicken to prevent spoilage.

Dishwasher Temperature Logs

In an interview on 06/04/2024 at 10:52 AM, Staff K said they did not keep dishwasher temperature logs. Staff K said they were never informed the kitchen was supposed to keep a daily record of the dishwasher's temperature. Staff J said they were not aware the kitchen was supposed to keep dishwasher temperature logs.

There were no dishwasher temperature logs records provided to review.

Refrigerator and Freezer Temperature Logs

Record review of the facility's, "Refrigerator/Freezer Temperature Log", dated 05/01/2024 – 05/31/2024, showed adequate temperature for the refrigerator was between thirty-three degrees and forty degrees and the freezer temperature should be negative ten degrees through negative 32 degrees. The document did not distinguish if the temperature was the refrigerator or freezer that was being recorded in the AM (morning) and PM (afternoon) columns. The AM temp column had ranges of negative 40 degrees to 39 degrees. The PM temp log column had ranges of zero through negative six degrees. There was no information to review on 05/24/2024, 05/25/2024, 05/30/2024, and 05/31/2024.

In an interview on 06/04/2024 at 10:43 AM, Staff E, Cook, said they kept temperature logs for the refrigerator and low boy (sandwich station). Staff E said inside of the refrigerator had a thermometer that gauged what the temperature was, and they recorded it. Staff E pointed to the "Refrigerator/Freezer Temperature Log", dated 05/01/2024 – 05/31/2024, and said that was the most updated temperature log they used.

Handwashing

In an observation on 06/03/2024 at 11:56 AM, Staff K, Dietary Aide was in the dining room

and was observed to take facility residents lunch orders for the 18 residents that were present. Staff K had a pen and paper they used to take down the orders. Staff K was observed to put the pen and paper in their pocket and without performing hand hygiene went to prepare hot chocolate for a resident at 12:00 PM. Staff K brought the hot chocolate to the resident at 12:00 PM, Staff K entered the kitchen and returned with 3 resident meals on a tray that they delivered. Staff K re-entered the kitchen and returned with 2 resident meals on a tray that they delivered. Staff K re-entered the kitchen at 12:03 PM and returned with soup and bread for 1 resident. Staff K re-entered the kitchen at 12:03 PM and returned with 1 residents' food that they delivered. Staff K re-entered the kitchen at 12:04 PM and returned with 1 residents' food that they delivered. At 12:05 PM another resident entered the dining room. At 12:06 PM Staff K exited the kitchen with 2 resident meals they delivered. Staff K then took out their pen and paper out of their pocket and took the residents order who had just entered. At 12:06 PM, Staff K greeted Resident 23 (R23) who entered the dining room and asked if they wanted iced tea. Without performing hand hygiene Staff K was observed to touch the ice scoop inside the bucket of ice on the rolling cart, Staff K touched the container of iced tea, filled the cup, and delivered it to R23. At 12:09 PM, R5 clapped to get Staff K's attention. R5 informed Staff K they needed their medication. Staff K left the dining room at 12:10 PM and returned at 12:12 PM. Without performing hand hygiene Staff K got a cup of coffee in a mug and left the dining room and went into the room labeled "servery". Staff K returned to the dining room at 12:13 PM and then re-entered the kitchen. At 12:13 PM staff K returned with 1 residents' meal. Between 11:56 AM and 12:36 PM staff K was not observed to complete any hand hygiene while they took residents orders and delivered residents their meals.

In an interview on 06/04/2024 at 10:43 AM, Staff J, Cook, said facility staff were supposed to wash their hands upon entering the kitchen. Staff J said they were supposed to wash their hands if they changed tasks within the kitchen. Staff J said they had to wash their hands a lot.

This is an uncorrected deficiency previously cited on 05/08/2024.

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, Centralia Point Assisted Living and Memory Care is or will be in compliance with this law and / or regulation on (Date) 08/09/2024.

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

Doreen Bann
Administrator (or Representative)

07/18/2024
Date



Residential Care Services Investigation Summary Report

Provider/Facility: Centralia Point Assisted
Living and Memory Care
License/Cert.#: 2609

Provider Type: Assisted Living Facility

Compliance Determination #: 36904

Intake ID: 117132

Investigator: Maria Salas

Region/Unit #: RCS Region 3 / Unit E

Investigation Date(s): 02/14/2024 through 05/08/2024

Complainant Contact Date(s):

Allegation(s):

1. Concerns of inadequate staffing.
2. Concerns of residents roomed together do not get along.
3. Concerns of improper training of staff.
4. Concerns of kitchen environment.

Investigation Methods:

Sample:	Total residents: 40 Resident sample size: 3 Closed records sample size: 0
Observations:	Identified resident Residents Activities Resident rooms Staff to resident interactions Resident to resident interactions Kitchen Food preparation
Interviews:	Nursing staff Residents Kitchen staff
Record Reviews:	Medical records State reporting log Incident investigation Facility policies Personnel files Staff training records

Investigation Summary:

1. Based on record review and interview facility met the minimum requirement for safe staffing. No failed practice identified.
2. Based on record review, interview and observation unable to substantiate residents at risk of harm. No failed practice identified.

3. Based on record review and interview facility had system in place to ensure proper training of staff. No failed practice identified.
4. Based on record review, interview and observation that facility failed to properly store and label foods. Failed practice identified.
-

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A



STATE OF WASHINGTON
 DEPARTMENT OF SOCIAL AND HEALTH SERVICES
 AGING AND LONG-TERM SUPPORT ADMINISTRATION
 800 NE 136th Ave Ste 200, Vancouver, WA 98684

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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 02/14/2024 and 05/08/2024 of:

Centralia Point Assisted Living and Memory Care
 2010 Cooks Hill Rd
 Centralia, WA 98531

This document references the following complaint number(s): 117132

The following sample was selected for review during the unannounced on-site visit: 3 of 40 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Maria Salas, ALF Complaint Investigator

From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 3, Unit E
 800 NE 136th Ave Ste 200
 Vancouver, WA 98684

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

05/17/2024

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.

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Dupe W Boun

Administrator (or Representative)

5/20/2024

Date

*Resolved by
5/31/24
Beyonce Boun
5/20/24*

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;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the facility failed to properly store and label food for 1 of 1 kitchen reviewed. These failures placed 40 of 40 residents at risk for receiving food that were incorrectly handled and stored, and food-borne illnesses.

Findings included...

WAC 246-215-03526 Temperature and time control—Ready-to-eat, time/temperature control for safety food, date marking (FDA Food Code 3-501.17).

(1) Except when packaging food using a reduced oxygen packaging method as specified under WAC 246-215-03540, and except as specified in subsections (5) and (6) of this section, refrigerated, ready-to-eat, time/temperature control for safety food prepared and held in a food establishment for more than twenty-four hours must be clearly marked to indicate the date or day by which the food must be consumed on the premises, sold, or discarded when held at a temperature of 41°F (5°C) or less for a maximum of seven days. The day of preparation must be counted as day one.

Record review of the facility's policy, Food Services- Preparation, Serving, Sanitation, dated 07/29/2021, showed food would be protected from contamination or adulteration by covering food or food storage containers with tightly fitting covers with metal, plastic, plastic wrap, or aluminum foil except during necessary preparation or cooling periods, or when serving food. Foods would be labeled when removed from original containers unless identity of the food was unmistakable.

Record review of signage on walk-in refrigerator door, 02/14/2024, stated for staff to label and date all food products. All foods must be covered in the walk in.

In an observation and interview on 02/14/2024 at 2:02pm, inside the walk-in refrigerator, there was a large multiple level rolling tray rack inside. Second tray on rack had multiple small individual containers some of the containers were labeled Ceasar, some were labeled French, none of the containers had dates. The other containers on same tray that were similar in appearance had no labeling or dates. Staff A, Dietary Manager, stated that the containers were filled with Ceasar, French, and Ranch salad dressing. When asked how staff knew which container had each type of dressing, Staff A stated that they could tell by the color of the substance in the containers. Third tray had three small bowls of Jello, uncovered with no label or date. One small bowl of bread like substance with light brown

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speckled sauce uncovered with no label or date. Staff A stated that they were desserts left over from the prior days' meals. The fourth tray had a partial cake that was gold, purple, and green in color. The cake was uncovered with no label or date. Staff A stated that it was a Mardi Gras cake from the day prior and that the evening kitchen staff should have thrown it away at the end of their shift.

In an observation and interview on 02/14/2024 at 2:08pm, inside of the walk-in refrigerator on middle shelf, there was a container labeled tuna melt dated 02/07/2024 and a small container labeled tomato paste dated 02/04/2024. Staff A state that these foods were outdated.

In an observation on 02/14/2024 at 2:11pm, inside the walk-in refrigerator on the left side, top shelf was an open plastic bag with no label or date. Contents of bag appeared to be green leafy plant matter with dark green, wilted edges on leaves. No manufacturer label or expiration date noted on the bag.

In an interview on 02/14/2024 at 2:23pm, Staff A, stated that he usually goes through, and checks all dates on foods to assess what needs to be used or thrown away. Staff A stated that there was no system in place for accountability of auditing foods. When Staff A was asked how he and other staff know how long open, prepped, and prepared foods were good for, Staff A stated that there was a "cheat sheet" in the kitchen that they all could reference. Staff A unable to locate said document in the kitchen or in his office.

In an interview on 02/14/2024 at 02:55pm, Staff B, Executive Director, stated that all foods should be labeled with the date they expire, and that all the staff had taken the food handler's course.

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, Centralia Point Assisted Living and Memory Care is or will be in compliance with this law and / or regulation on (Date) 5/31/24.

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

Bryan Boun
Administrator (or Representative)

5/20/2024
Date



Regarding the SOD 36904, I, Bryce Bower, Administrator for Centralia Point Assisted Living & Memory Care intend to be in compliance with the attached violation by 05/31/2024.

I have reviewed applicable regulations with all Dietary Staff in regards to ensuring stored food items are covered and dated appropriately, and thrown away when food is expired or out of date.

I have asked my team to review our policy on Food Services-Preparation, serving and sanitation. This policy is posted in the kitchen as well for them to review whenever necessary.

I will have my Food Service Director audit food storage daily the end of each of their scheduled shift to ensure all necessary food items are covered and dated appropriately, and expired food is thrown out. In the absence of a Food Service Director on Staff, I will audit these items at least twice weekly.

My Dietary team also has signs posted in the kitchen showing how long the foods they commonly serve are safe to be stored and reheated. I have also asked them to contact myself immediately should they have any questions or concerns in relation to this.

Thank you for partnering with us in ensuring the care for our Residents remains safe at all times!

Please let me know if you need anything further at this time!

Bryce Bower, Administrator: Bryce Bower

Date: 05/24/2024