



Protecting, Maintaining and Improving the Health of All Minnesotans

Electronically Delivered

November 19, 2024

Licensee

The Waters of White Bear Lake
3820 Hoffman Road
White Bear Lake, MN 55110

RE: Project Number(s) SL32917016

Dear Licensee:

The Minnesota Department of Health (MDH) completed a survey on October 15, 2024, for the purpose of evaluating and assessing compliance with state licensing statutes. At the time of the survey, MDH noted no violations of the laws pursuant to Minnesota Statute, Chapter 144G, Minnesota Food Code, Minnesota Rules Chapter 4626, Minnesota Statute 626.5572 and/or Minnesota Statute Chapter 260E.

The enclosed State Form documents no violations. MDH documents the state correction orders using federal software. Please disregard the heading of the fourth column that states, "Provider's Plan of Correction." A plan of correction is not required.

The MDH Health Regulation Division (HRD) values your feedback about your experience during the survey and/or investigation process. Please fill out this anonymous provider feedback questionnaire at your convenience at this link: <https://forms.office.com/g/Bm5uQEPhVa>. Your input is important to us and will enable MDH to improve its processes and communication with providers. If you have any questions regarding the questionnaire, please contact Susan Winkelmann at susan.winkelmann@state.mn.us or call 651-201-5952.

You are encouraged to retain this document for your records. It is your responsibility to share the information contained in the letter and state form with your organization's Governing Body.

If you have any questions, please contact me.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jess Schoenecker'.

Jess Schoenecker, Supervisor
State Evaluation Team
Email: Jess.Schoenecker@state.mn.us
Telephone: 651-201-3789 Fax: 1-866-890-9290

HHH

Minnesota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 32917	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____		(X3) DATE SURVEY COMPLETED 10/15/2024
NAME OF PROVIDER OR SUPPLIER THE WATERS OF WHITE BEAR LAKE		STREET ADDRESS, CITY, STATE, ZIP CODE 3820 HOFFMAN ROAD WHITE BEAR LAKE, MN 55110			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETE DATE
0 000	Initial Comments SL32917016-0 On October 14, 2024, through October 15, 2024, the Minnesota Department of Health conducted a survey at the above provider. At the time of the survey, there were 134 residents; 58 receiving services under the Assisted Living with Dementia Care license. As a result of the survey, the licensee was found to be in compliance with the assisted living statutes 144G.08 through 144G.95.	0 000			

Minnesota Department of Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Type: Full
Date: 10/14/24
Time: 10:11:48
Report: 8058241267

Food and Beverage Establishment Inspection Report

Page 1

Location:

The Waters Of White Bear Lake
3820 Hoffman Road
White Bear Lake, MN55110
Ramsey County, 62

Establishment Info:

ID #: 0038043
Risk:
Announced Inspection: No

License Categories:

Expires on: / /

Operator:

Phone #: 6513136440
ID #:

The violations listed in this report include any previously issued orders and deficiencies identified during this inspection. Compliance dates are shown for each item.

No NEW orders were issued during this inspection.

Surface and Equipment Sanitizers

Quaternary Ammonia: = 200 PPM at --- Degrees Fahrenheit
Location: DISPENSER
Violation Issued: No

Hot Water: = --- at 171 Degrees Fahrenheit
Location: DISH MACHINE
Violation Issued: No

Food and Equipment Temperatures

Process/Item: TOMATO
Temperature: 38 Degrees Fahrenheit - Location: PREP
Violation Issued: No

Process/Item: CHICKEN SALAD
Temperature: 37 Degrees Fahrenheit - Location: PREP
Violation Issued: No

Process/Item: EGG SALAD
Temperature: 41 Degrees Fahrenheit - Location: PREP
Violation Issued: No

Process/Item: HAM
Temperature: 37 Degrees Fahrenheit - Location: PREP
Violation Issued: No

Process/Item: TURKEY
Temperature: 38 Degrees Fahrenheit - Location: PREP
Violation Issued: No

Type: Full
Date: 10/14/24
Time: 10:11:48
Report: 8058241267
The Waters Of White Bear Lake

Food and Beverage Establishment
Inspection Report

Process/Item: BEEF ROAST
Temperature: 41 Degrees Fahrenheit - Location: WALK IN
Violation Issued: No

Process/Item: CHICKEN
Temperature: 38 Degrees Fahrenheit - Location: WALK IN
Violation Issued: No

Process/Item: PORK
Temperature: 40 Degrees Fahrenheit - Location: WALK IN
Violation Issued: No

Process/Item: STRAWBERRY
Temperature: 38 Degrees Fahrenheit - Location: WALK IN
Violation Issued: No

Total Orders	In This Report	Priority 1	Priority 2	Priority 3
		0	0	0

HRD INSPECTOR BRANDON MUELLER

COMMERCIAL KITCHEN SPACE

TWO REMOTE KITCHENS IN MEMORY CARE UNITS ARE NO LONGER USED FOR STORAGE AND ARE LIMITED TO USE ONLY DURING IMMEDIATE SERVICE

DISCUSSED EMPLOYEE EXCLUSION, SICK TIME, PERSON TO PERSON ILLNESS POTENTIAL, SHELLED EGG USE, COOLING/COOKING OF WHOLE MUSCLE ROAST

NOTE: Plans and specifications must be submitted for review and approval prior to new construction, remodeling or alterations.

I acknowledge receipt of the Minnesota Department of Health inspection report number 8058241267 of 10/14/24.

Certified Food Protection Manager RYAN BECKER

Certification Number: 87036 Expires: 04/18/26

Inspection report reviewed with person in charge and emailed.

Signed: _____
RYAN BECKER
PIC

Signed:  _____
Aaron Gertz
Sanitarian 3
MDH Metro Office
651 201 4500
health.foodlodging@state.mn.us