

RI Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALR01508	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/20/2025
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NAME OF PROVIDER OR SUPPLIER GREENWICH FARMS AT WARWICK	STREET ADDRESS, CITY, STATE, ZIP CODE 75 MINNESOTA AVENUE WARWICK, RI 02888
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S 003	Initial Comments An unannounced biennial State Licensure survey was conducted at this residence on 08/19/2025 through 08/20/2025. Deficiencies were identified relative to the State Licensure survey.	S 003	The filing of this Plan of Correction does not constitute an admission regarding the alleged findings, deficiencies, or violations. The Plan of Correction is filed in compliance with applicable law and demonstrates the community's commitment to quality care.	
S 055	Licensure Requirements 2.4.3 Quality Assurance 2.4.3 Quality Assurance A. In accordance with R.I. Gen. Laws § 23-17.4-10.1, each assisted living residence shall develop, implement and maintain a documented, ongoing quality assurance program. 1. The purpose of this program shall be to attain and maintain a high quality assisted living residence through an on-going process of quality improvement that monitors quality, identifies areas to improve, methods to improve them, and evaluates the progress achieved. 2. Each licensed residence shall establish a quality improvement committee which shall include at least the following: assisted living administrator, registered nurse and a representative of dietary services. 3. The quality improvement committee shall meet at least quarterly; shall maintain records of all quality improvement activities; and shall keep records of committee meetings that shall be available to the Department during any onsite visit. 4. The quality improvement committee shall review and approve the quality improvement plan for the residence at intervals not to exceed twelve (12) months. Said plan shall be available to the public upon request.	S 055	Received SEP 10 2025 Facilities Regulation (Signature) 9/10/2025	

Facilities Regulation

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

TITLE

(X6) DATE

[Signature]

Dr. Executive Director

9/10/25

STATE FORM

6899

MMMK11

If continuation sheet 1 of 9

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S 055	Continued From page 1 5. Each assisted living residence shall establish a written quality improvement plan that includes: a. Program objectives; b. Oversight responsibility (e.g., reports to the governing body, QI records); c. Includes methods to identify, evaluate, and correct identified problems; d. Provides criteria to monitor personal assistance and resident services, including, but not limited to: (1) Resident/family satisfaction; (2) Medication administration/errors; (3) Reportable incidents as specified in § 2.4.17 of this Part; (4) Resident falls; (5) Plans of correction developed in response to the Department's inspection reports. B. In addition to the requirements of §§ 2.4.3(A) (1) through (5) of this Part, all assisted living residences with a "dementia care" license and/or a "limited health services license" shall also address the following areas in their quality improvement plan: a. Prevention and treatment of decubitus ulcers;	S 055			

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S 055	Continued From page 2 b. Dehydration, and nutritional status and weight loss or gain; and c. Changes in mental or psychological status. 1. Quality improvement documentation shall be kept on file for a minimum of five (5) years. This Requirement is not met as evidenced by: Based on record review and staff interview, it has been determined that the residence failed to establish a written quality improvement plan with program objectives and methods to identify, evaluate, and correct identified problems. Findings are as follows: Record review of the June 2025 quality assurance program minutes failed to reveal evidence that the residence was identifying, evaluating, and correcting areas of needed improvement in the written plan of performance relative to dining services. Record review revealed the Director of Dining Services to be present at the meetings; however, there was no representation of that department on the agenda, nor was there a record of dining and food services being discussed in the meeting minutes. During a surveyor interview on 8/20/2025 at approximately 3:00 PM with the Executive Director, she could not provide evidence that the quality assurance plan for June 2025 included the dining services department, as required.	S 055	S 055 The Annual Quality Assurance Plan was updated to include review of the dining services department, kitchen, and sanitation to identify areas of concern and corrective actions. Quarterly Quality Assurance meetings will include a documented review of the dining services department, kitchen, and sanitation to include concerns and solutions. The Administrator or designee will ensure that the community establishes and maintains the Quality Assurance Plan.	9/3/25 9/30/25 Ongoing

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S 490	Residential Care Services 2.4.21.C Dietetic Services 2.4.21 (C) Dietetic Services C. The food service in each residence shall comply with the appropriate requirements of R.I. Gen. Laws Chapters 21-27 and 21-31, Rhode Island Food Code (Part 50-10-1 of this Title), and such other applicable statutory or regulatory provisions. This Requirement is not met as evidenced by: Based on surveyor observation and staff interview, it has been determined the residence failed to comply with the appropriate requirements of the Rhode Island Food Code related to the main kitchen and the Harbor unit kitchenette. Findings are as follows: 1. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section 4-501.110 states in part, "...temperature of the wash solution in spray type dishwashers that use hot water to sanitize may not be less than for a stationary rack, single temperature machine, 74 degrees C (Celsius) (165 degrees F (Fahrenheit))..." During a surveyor observation on 8/19/2025 at approximately 12:40 PM of the main kitchen, the dish machine registered at 157 degrees F. During a surveyor interview immediately following the above-mentioned observation with the Director of Dining Services (DDS), he was	S 490	S 490 The hot water dishwasher was serviced on 8/19/25. The rinse temperature was adjusted to 195 degrees. The wash temperature was adjusted to 165 degrees. The temperature of the hot water rinse will be recorded on a monthly log by the dishwasher three times a day. The Dining Services Director or designee will review rinse temperature logs daily. The monthly rinse temperature logs will be maintained by the Dining Services Director.	8/19/25	Ongoing

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S 490	Continued From page 4 unaware the dish machine was not reaching the appropriate sanitizing temperature. 2. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section 4-601.11A states in part, "...Equipment food contact surfaces...shall be clean to sight and touch..." During a surveyor observation on 8/19/2025 at 11:40 AM, in the presence of the Executive Director (ED), in the kitchenette on the Harbor unit the following was revealed: -Refrigerator shelving with "sticky" surface -Freezer compartment of the refrigerator with brown colored substance on the bottom shelf Immediately following the above mentioned observation, the ED acknowledged the refrigerator and freezer were in need of cleaning. During a surveyor observation on 8/19/2025 at approximately 12:40 PM of the main kitchen, the chute of the ice machine had an accumulation of a brown colored substance along the lower rim. 3a. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section 4-601.11C states in part, "...non-contact food surfaces of equipment shall be kept free from an accumulation of...food debris and other debris..." b. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section 4-602.13 states in part, "...non-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude	S 490	The Harbor refrigerator shelves and freezer have been cleaned. Harbor refrigerator and freezer cleaning has been added to the overnight job tasks for the Harbor associates. The Mind and Memory Director or designee will ensure that the refrigerator shelves and freezer are clean. The rim of the ice machine was cleaned on 8/19/25. A replacement rim was ordered on 9/3/25 and will be installed when it is received. Community will schedule quarterly service to clean ice machine and check filters. Replacement filters for the ice machine have been ordered and will be installed when received. Ice machine filters will be replaced as needed and at minimum per manufacturer recommendation.	8/19/25 Ongoing Ongoing 8/19/25 9/3/25 Ongoing Ongoing

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S 490	Continued From page 5 accumulation of soil residues..." During a surveyor observation of the main kitchen on 8/19/2025 at approximately 12:40 PM the following was revealed: -Worktable shelving with food debris -Alto shaam with grease build up -Corners of stove with build up of grease During a surveyor observation on 8/20/2025 at 10:30 AM of the second-floor coffee station the following was revealed: -The drip tray of the juice machine with juice pulp accumulation. 4. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section 3-509.19 states in part, "...food shall have an initial temperature of 5 degrees C (41 degrees F) or less when removed from cold holding temperature control..." During a surveyor observation on 8/19/2025 at 12:30 PM of the lunch meal service in the main dining room, in the presence of the DDS the fat free milk had a cold holding temperature of 43 degrees F and the whole milk had a cold holding temperature of 45 degrees F. Immediately following the above-mentioned observation, the DDS acknowledged the temperatures of both milk products were not within the acceptable parameters. 5. Record review of the 2022 Food Code published by the U.S. Food and Drug	S 490	Kitchen surfaces (worktable shelving, stove, juice machine drip tray) were cleaned on 8/19/15. Alto Shaam machine is not being utilized at this time and has been removed from the kitchen. Chefs and dishwashers will be re-educated regarding cleaning and sanitation schedule and expectations. Daily log will be utilized to record sanitation (copy of "Daily Sanitation Log" attached). Weekly log sheets will be reviewed and maintained by Dining Services Director or designee. Cold beverages will be maintained at 41 degrees or less. Servers will be re-educated to keep cold beverages in the refrigerator and to pour cold beverages in the kitchen and serve them to the residents.	8/19/25 9/15/25 9/15/25 Ongoing Ongoing 9/30/25

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S 490	Continued From page 6 Administration, Section 3.501.17 states in part, "...refrigerated ready to eat food and held more than 24 hours...shall be clearly marked to indicate the date the food shall be consumed...discarded...for a maximum of 7 days..." During a surveyor observation on 8/19/2025 at 12:45 PM of the walk-in refrigerator, in the presence of the DDS, a container of rice pudding had a date of 8/3/2025. Immediately following the observation, the DDS indicated the product should be discarded within 7 days. During a surveyor interview on 8/20/2025 at 3:00 PM with the ED, she was unable to provide a residence policy regarding cold food storage. 6. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section 3-303.11 states in part, "...ice that has been in contact with unsanitized surfaces may contain pathogens and other contaminants..." During a surveyor observation on 8/19/2025 at 11:30 AM of the Harbor unit kitchenette in the presence of the ED, the freezer unit of the refrigerator had two ice cube trays stored, uncovered. Immediately following the above-mentioned observation, the ED acknowledged the ice cube trays should not be in use. 7. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section 3-305.11 states in part, "...food shall be protected from contamination by storing the food...where it is not exposed to	S 490	Food item with outdated label was immediately removed and discarded. Chefs will be re-educated regarding labeling, dating, rotating, and discarding food. Daily log will be utilized to record kitchen food storage and rotation (copy of "Daily Sanitation Log" attached). Weekly log sheets will be reviewed and maintained by the Dining Services Director or designee. Community will follow cold food storage guidelines. Temperatures for Food Safety Notices are displayed in the kitchen (copy of "Temperatures for Food Safety" notice attached). All chefs and servers will be re-educated on temperatures for food safety. The ice cube trays in the Harbor freezer have been removed. Ice cubes will be supplied by the kitchen during meal times. Uncovered ice cubes will not be stored in the Harbor freezer. The Mind and Memory Director or designee will ensure that there are no ice cube trays in the Harbor freezer.	8/19/25 9/15/25 9/15/25 Ongoing 9/3/25 9/30/25 8/19/25 8/20/25 Ongoing

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S 490	Continued From page 7 splashes, dust, or other contaminants..."	S 490	The resident's ice pack was removed from the Harbor freezer.	8/19/25	
	During a surveyor observation on 8/19/2025 at 11:30 AM of the Harbor unit dining room, in the presence of the ED, the refrigerator's freezer had a resident's ice pack stored.		The Mind and Memory Director notified the resident's family that ice packs are not to be put into the Harbor freezer. Family acknowledged understanding.	8/20/25	
	Immediately following the above-mentioned observation, the ED acknowledged the ice pack was stored in an inappropriate location.		The Mind and Memory Director or designee will ensure that resident ice packs are not in the Harbor freezer.	Ongoing	
	8. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section 2-402.11 states in part, "...food employees shall wear hair restraints such as...beard nets..."				
	During a surveyor observation on 8/19/2025 at 12:45 PM, Dietary Cook, Staff A, was observed working in the main kitchen without a beard net.		Chefs and servers with beards will be re-educated on the requirement for beard nets.	9/15/25	
	An additional surveyor observation on 8/19/2025 at 2:30 PM of the main kitchen, Dietary Cook, Staff B, was working in the main kitchen without a beard net.		Chefs and servers with beards who are in contact with exposed food will wear a beard net.	Ongoing	
	9. Record review of the 2022 Food Code published by the U.S Food and Drug Administration Section, 2-301.14 states in part, "...when to wash...food employees shall clean their hands...after handling soiled equipment or utensils..."				
	During a surveyor observation on 8/19/2025 at 12:45 PM of the main kitchen, the dishwasher, Staff C, failed to wash his hands after handling soiled dishes and proceeded to touch clean dishes and glasses.		Dishwashers will wash their hands after touching soiled dishes/glasses before touching clean dishes/glasses.	Ongoing	
	During a surveyor interview on 8/19/2025 at		Dishwashers will be re-educated to wash hands between touching soiled items and clean items.	9/15/25	

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S 490	Continued From page 8 approximately 1:30 PM with the DDS, he was unable to provide evidence that the ice machine and the kitchen equipment including the alto shaam, stove, shelves under the work tables and juice machine were free of debris. Additionally, he was unable to provide evidence that the dietary cooks were wearing beard nets and that the dishwashing staff were following handwashing procedures to prevent cross contamination.	S 490			