STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017088	A. BUILDING: _____ B. WING _____	R-C 11/22/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LEGACY ASSISTED LIVING	N26W26511 COLLEGE AVE PEWAUKEE, WI 53072

(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
{N 000}	Initial Comments On 11/21/2023, Surveyor conducted a verification visit to Statement of Deficiency (SOD) #DSWG11 dated 07/26/2023 and SOD #ERND14, dated 05/23/2023 at Legacy Assisted Living. Survey findings from SOD #ERND14 are combined with SOD #DSWG12. Three deficiencies were identified. Two are repeat deficiencies from SOD # ERND14, dated 05/23/2023, #ERND12, dated 10/17/2022 and #ERND13, dated 01/18/2023 was issued. Under statutory provisions of Wis.Stat. ch. 50 a $200 revisit fee is being assessed. Census: 14	{N 000}		
N 452	83.41(3)(b) Food safety. Food safety. Whether food is prepared at the CBRF or off-site, the CBRF shall store, prepare, distribute and serve food under sanitary conditions for the prevention of food borne illnesses, including food prepared off-site, according to all of the following: 1. The CBRF shall refrigerate all foods requiring refrigeration at or below 40°F. Food shall be covered and stored in a sanitary manner. 2. The CBRF shall maintain freezing units at 0°F or below. Frozen foods shall be packaged, labeled and dated. 3. The CBRF shall hold hot foods at 140°F or above and shall hold cold foods at 40°F or below until serving.	N 452		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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N 452	Continued From page 1	N 452		

This Rule is not met as evidenced by:
Based on observation and interview, the provider did not ensure food was prepared and stored in safe, sanitary conditions.

This is a repeat violation from previous Statement of Deficiency (SOD) ERND12, dated 10/17/2022; SOD ERND13, dated 01/18/2023 and SOD ERND14, dated 05/23/2023.

Findings include:

On 11/21/2023, at approximately 12:00 PM, Surveyor observed lunch in process of being served. At 12:11 PM, Surveyor toured the kitchen. Surveyor observed the entrance to the kitchen, floor linoleum section of flooring was missing (approximately 24 by 12 inches and 12 inches by 12 inches). The door to the kitchen did open completely and rubbed against the floor. (Photo 1100 at 12:17 PM).

The island, in the center of the kitchen, contained multiple cabinets which were greasy to the touch. The drawer and face of the drawer facing the stove was broken and did not contain a covering. Surveyor asked Caregiver I, who identified self as the cook for the day, how long it had been broken. Caregiver I stated a while but did not know how long specifically. Surveyor asked if it was reported to management to be repaired. Caregiver I stated s/he did not know. (Photo 1095 at 12:15 PM). The cabinets were greasy to the touch and contained multiple spills and stains. Observed inside the lower cabinets, several mixing bowls and covers. The shelf the bowls were stored on, appeared very stained. (Photo 1148 at 12:46 PM).

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N 452	Continued From page 2 Several drawers contained utensils. The drawers contained crumbs and food particles. The kitchen refrigerator outer surface and handles contained many stains and dried spills. The handles were greasy to the touch. (Photo 1093 at 12:14 PM). Inside the refrigerator, the shelves and bottom self contained many food particles. The seal on the refrigerator was broken. A large metal pan contained Alfredo. The container was not labeled nor dated. Surveyor asked Caregiver I when the item was made, served and what it was. Caregiver I stated s/he thought 11/19/2023, it was Alfredo and they planned to serve it again on 11/21/2023, for the evening meal. A plastic bag containing bacon was observed in the refrigerator. The bag was not sealed. The outer surface of the bag was very greasy. The oven contained multiple burn marks on the back splash. Dried spills on the sides of the oven and doors. (Photo 1099 at 12:16 PM). On 11/21/2023, at 12:11 PM, Surveyor observed several boxes of frozen foods including shrimp, Boston cream pies, cut green beans, pork and a box of potatoes. The items were stored on the floor of the food pantry. The food pantry flooring was very dirty. At 1:31 PM, Surveyor returned to the area, and noted the items remained on the floor. Surveyor asked Caregiver I when the food was delivered. Caregiver I stated just before noon. Caregiver I stated s/he needed to serve the residents lunch and did not have time to put the items away. Stored on shelves in the pantry, plastic bags of dry goods were not sealed. On 11/21/2023 at 2:08 PM, Surveyor interviewed	N 452		

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N 452	Continued From page 3 Acting Director H regarding the kitchen. Acting Director H stated the former kitchen manager had left employment with Legacy Assisted Living of Pewaukee and s/he was responsible for the cleanliness of the kitchen and food safety. Acting Director H stated they are in the process of hiring a new manager. Acting Director H stated the kitchen should have been much cleaner and did not know about the broken seal on the door and when the broken cabinets would be repaired. Acting Director H stated the caregivers are assigned cooking and cleaning responsibilities. "Date marking is a way to control the growth of a bacteria called Listeria, which grows under refrigeration and is the third leading cause of death from foodborne illness in the United States." (Source: Wisconsin Food Code Fact Sheet, Date Marking of Ready-to-Eat Time-Temperature Control for Safety Foods, April 2022)	N 452		
N 481	83.43(1) Environment safe, clean, and comfortable Environment. The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas shall contain furnishings appropriate to the intended use of the room. This Rule is not met as evidenced by: Based on observation and staff interview, the CBRF did not provide a clean living environment. Findings include:	N 481		

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N 481	Continued From page 4 On 11/21/2023, at 11:45 AM, Surveyor toured the facility. Surveyor observed the following: Carpeting in Resident 2's room contained multiple stains. Carpeting in Resident 8's room contained multiple stains and accumulation of crumbs. The walls contained multiple black marks and the bathroom walls contained stains. Resident 7's room light flickered continuously. The carpeting was stained. Brown matter observed on the walls in the bathroom. Bathroom of room not identified as occupied, Room 126, contained multiple brown spots on the toilet, the wall by the toilet, and floor. Toilet paper holder broken. The bathroom in Resident 6's room contained brown matter, the toilet appeared to be leaking. Brown matter observed on the toilet seat and by the wall. Unoccupied room 115, floor contained multiple stains and debris. Wall in main activity area/family room, by room 114 contained multiple marks and needed painting. (Photo 1114 at 12:28PM). At approximately 12:45 PM, Surveyor showed Executive Director A and Acting Director H the rooms with the brown matter. Surveyor asked how the facility ensured the resident rooms, bathrooms and common areas were clean. Executive Director A stated that the caregivers are responsible to ensure cleaning is done as they currently do not have a housekeeper on staff.	N 481		

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N 499	83.45(3) Toxic substances. Toxic substances. The CBRF shall ensure that cleaning compounds, polishes, insecticides and toxic substances are labeled and stored in a secure area. This Rule is not met as evidenced by: Based on observation and staff interview the provider did not ensure all cleaning compounds and toxic substances were stored in a secure manner. This is a repeat deficiency. See Statement of Deficiency (SOD) ERND14, dated 05/23/2023. Findings include: Legacy Assisted Living is a Class CNA (Non-ambulatory) facility and serves individuals who may be developmentally disabled, advanced aged, terminally ill or have irreversible dementia/Alzheimer's with a capacity for 32 adults. On 11/21/2023, at 11:45 AM, Surveyor toured the facility. Surveyor observed an unlocked/unsecured "Utility Room" located across from room 118. The room contained the following: 3- 32 ounce containers of Odo-Ban Disinfectant. 1-Gallon container of Odo-Ban Disinfectant. The label contained a warning "harmful if swallowed, keep away from children." "Hoover Deep Clean and Restore"- 128 ounces. Lysol Disinfectant Spray- 4 cans. Lysol-Advanced Power Clinging Gel 4 pack- 32 ounces each. Murphy's Soap- 32 ounces. Surveyor returned to the room at 12:19 PM and 12:43 PM, the door remained unsecured/unlocked.	N 499		

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N 499	Continued From page 6 On 11/21/2023, at 11:45 AM, 12:19 PM and 12:43 PM, Surveyor observed in a closet off the hallway by room 121, a container of WD-40 and 8-Tom Cat Mouse traps. On 11/21/2023, at 12:43 PM, Surveyor showed Acting Director H and Executive Director A the unsecured chemicals. Executive Director A explained that the maintenance person did not come to work on 11/20/2023 and the rooms should have been secured.	N 499		