STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016760	A. BUILDING: _____ B. WING _____	C 04/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MEADOWS OF FALL RIVER CBRF (THE)	101 HOMETOWN AVE FALL RIVER, WI 53932

(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 04/16/2025, Surveyor conducted 2 complaint investigations at Meadows of Fall River CBRF (The). One deficiency was identified. One complaint was substantiated. One complaint was unsubstantiated. Census: 17	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. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure food was stored in a sanitary	N 452		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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MEADOWS OF FALL RIVER CBRF (THE)	101 HOMETOWN AVE FALL RIVER, WI 53932

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N 452	Continued From page 1	N 452		

manner. The provider's walk-in refrigerator had mold on food/drink items and shelving.

Findings include:

On 03/26/2025, the Department received a complaint alleging the facility had mold in the kitchen.

On 04/16/2025, Surveyor conducted a complaint investigation and observed the following:

On 04/16/2025 at 9:15 AM, Surveyor interviewed Food Service Director (FSD) C regarding food safety concerns. FSD C reported in the past there had been mold observed in the facility's walk-in refrigerator on containers with white lids, but s/he was not aware of any ongoing concerns. Surveyor toured provider's walk-in refrigerator with FSD C. Surveyor observed 6 unopened (1) gallon containers of apple cider with a white/greenish mold-like substance speckled near the lids and all over the containers (see photo #1456). The 6 gallons of apple cider had an expiration date of 11/08/2024 (see photo #1460). Observed a ½ gallon container of zesty orange sauce with a white/greenish mold-like substance crusted to the lid (see photo #1447 & #1448). Surveyor observed a white/greenish mold-like substance speckled on the shelving in the provider's walk-in refrigerator. FSD C agreed the white/greenish substance observed was consistent with mold. FSD C shared the provider's procedure on food delivery days and stated the walk-in refrigerator was supposed to be cleaned weekly by Cook D. Surveyor asked why the above containers were still in the refrigerator if cleaned weekly. FSD C stated, "that's a good question" and noted they should have been thrown away when expiring and/or

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MEADOWS OF FALL RIVER CBRF (THE)	101 HOMETOWN AVE FALL RIVER, WI 53932

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N 452	Continued From page 2 observed with mold. On 04/16/2025 at 9:25 AM, Surveyor interviewed Cook D. Cook D stated s/he was not aware of any food safety concerns in the provider's walk-in refrigerator. Surveyor showed Cook D pictures of the above concerns observed in the provider's walk-in refrigerator. Cook D reported after our weekly food deliveries on Fridays, I'm (Cook D) supposed to clean the walk-in refrigerator, get rid of any expired food, and rotate older items to the front/newer items to the back. Cook D acknowledged an understanding of the food safety concerns and stated it was hard to clean both the walk-in refrigerator and freezer all by him/herself. Cook D reported s/he will work with FSD C to get the walk-in refrigerator up to code. On 04/16/2025 at 1:50 PM, Surveyor interviewed Administrator A and Nurse B regarding the food safety concerns. Administrator A acknowledged an understanding of the concerns and will work with FSD C to ensure compliance.	N 452		