STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018680	A. BUILDING: _____ B. WING _____	06/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CROSSROADS CARE CENTER OF MAYVILLE MEMOF	305 S CLARK ST MAYVILLE, WI 53050

(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 06/16/2025, Surveyor conducted an abbreviated survey at Crossroads Care Center of Mayville Memory Care, a CBRF in Mayville. Two deficiencies were identified. Census: 15	N 000		
N 357	83.32(3)(m) Rights of Residents: Recording and filming In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Recording, filming, photographing. Not be recorded, filmed or photographed without informed, written consent by the resident or resident ' s legal representative. The CBRF may take a photograph for identification purposes. The department may photograph, record or film a resident pursuant to an inspection or investigation under s. 50.03(2), Stats., without his or her written informed consent. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure residents were free from recording. The provider had a camera recording residents. Findings include: On 06/16/2025 at approximately 11:20 a.m., Surveyor observed 2 cameras in the provider's facility. One camera was positioned to view the dining room and one camera was positioned to view a hallway (used to access the dining room), nurse's station and medication cart.	N 357		

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

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N 357	Continued From page 1 On 06/16/2025 at approximately 11:25 a.m., Surveyor interviewed Caregiver B and asked about the cameras. Caregiver B stated s/he believed the cameras were working and wasn't aware they were not allowed. On 06/16/2025 at approximately 12:10 p.m., Surveyor interviewed Assistant Administrator A regarding the 2 cameras observed. Assistant Administrator A stated the camera facing the dining room was not active; however, the camera facing the nurse's station, which also captured the hallway utilized by residents, was active. Surveyor asked Assistant Administrator A if the provider had an approved waiver from the department regarding the use of cameras. Assistant Administrator A replied, "No," and explained that they had consent from residents. Assistant Administrator A stated the camera was there because the assisted living rooms had previously been skilled nursing facility rooms, which allow cameras. On 06/16/2025 at approximately 12:15 p.m., Surveyor reviewed the department's facility folder for the provider and did not locate an approved wavier regarding the use of a camera and recording residents.	N 357		
N 488	83.44(1)(c) Clothes dryers enclosed and vented Clothes dryers. The CBRF shall enclose any clothes dryer having a rated capacity of more than 37,000 Btu/hour in a one-hour fire resistive rated enclosure. If the clothes dryer requires a vent, the CBRF shall use dryer vent tubing that is of rigid material with a fire rating that exceeds the temperature rating of the dryer. The dryer vent	N 488		

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CROSSROADS CARE CENTER OF MAYVILLE MEMOF	305 S CLARK ST MAYVILLE, WI 53050

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N 488	Continued From page 2 tubing shall be clean and maintained. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure the dryer vent tubing was made of rigid material. One of 1 dryer vents was made of semi-rigid material. Findings include: On 06/16/2025 at approximately 11:20 a.m., Surveyor toured the provider's laundry room with Caregiver B. Surveyor observed the provider's dryer had a semi-rigid vent. Surveyor shared concern that the dryer vent was not made of rigid material. Caregiver B replied, "That's on maintenance." On 06/16/2025 at approximately 12:30 p.m., Surveyor reviewed concern with Assistant Administrator A that the provider's dryer had a semi-rigid vent. Assistant Administrator A wrote down Surveyor's concern and stated s/he would follow up with maintenance.	N 488		