

Wisconsin Department of Health Services

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>0017565</b>           | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____                                                   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>R-C<br/>09/16/2024</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>RYAN COMMUNITY INC</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>913 S WEST AVE<br/>APPLETON, WI 54915</b> |                                                                                                                          |                                                                |
| (X4) ID<br>PREFIX<br>TAG                                      | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ID<br>PREFIX<br>TAG                                                                   | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE                                       |
| {N 000}                                                       | Initial Comments<br><br>On 09/16/2024, Surveyor conducted a verification visit at Ryan Community Inc. Five of 6 previous deficiencies were corrected. One deficiency was identified.<br>One deficiency was a repeat violation. See Statement of Deficiency (SOD) ZTFS11, dated 08/30/2023.<br><br>Under statutory provisions of Wis. Stat. Ch. 50, a \$200 revisit fee will be assessed.<br><br>Census: 16                                                                                                                                                                                                                                                                                                                                                          | {N 000}                                                                               |                                                                                                                          |                                                                |
| {N 452}                                                       | 83.41(3)(b) Food safety.<br><br>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.<br><br>This Rule is not met as evidenced by:<br>Based on observation and interview, the CBRF | {N 452}                                                                               |                                                                                                                          |                                                                |

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

TITLE

(X6) DATE

Wisconsin Department of Health Services

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| NAME OF PROVIDER OR SUPPLIER<br><br><b>RYAN COMMUNITY INC</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>913 S WEST AVE<br/>APPLETON, WI 54915</b> |                                                                                                                          |                                                                |
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| {N 452}                                                       | <p>Continued From page 1</p> <p>did not ensure food was stored under sanitary conditions for the prevention of food borne illness. A refrigerator was not maintained at 40 degrees Fahrenheit or lower. Various pantry, refrigerator, and freezer food items were not covered, sealed, labeled, and/or stored in a sanitary manner. Various pantry, refrigerator, and freezer food items were being stored or open and being consumed past "Best By" and "Use By" dates. The provider did not have an identified standard of practice to identify the quality of foods maintained and served after the best by/use by dates.</p> <p>This is a repeat deficiency. See Statement of Deficiency (SOD) ZTFS11, dated 08/30/2023.</p> <p>Findings include:</p> <p>The provider is licensed as a class AA (ambulatory) community-based residential facility licensed to serve up to 21 correctional clients.</p> <p>On 09/16/2024, Surveyor conducted a verification visit.</p> <p>Surveyor note: According to the Wisconsin Food Code located at:<br/><a href="https://docs.legis.wisconsin.gov/code/admin_code/atcp/055/75_.pdf">https://docs.legis.wisconsin.gov/code/admin_code/atcp/055/75_.pdf</a> states, " (Retrieval Date 10/30/2024)...Time/Temperature Control for Safety Food shall be maintained: (1) At 57 degrees C [Celsius] (135 degrees F[Fahrenheit]) or above, except that roasts cooked to a temperature and for a time specified in 3-401.11 (B) or reheated as specified in 3-403.11 (E) may be held at a temperature of 54 degrees C (130 degrees F) or above; (2) At 5 degrees C (41 degrees F) or less."</p> | {N 452}                                                                               |                                                                                                                          |                                                                |

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| {N 452}                                                       | <p>Continued From page 2</p> <p>Additionally, the Wisconsin Food Code states, "Except when packaging food using a reduced oxygen packaging method as specified under 3-502.12, and except as specified in (E), (F), and (H) of this section, refrigerated, ready-to-eat, time/temperature control for safety food prepared and held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at a temperature and time combination of 5 degrees C (41 degrees F) or less for a maximum of 7 days. The day of preparation shall be counted as Day 1."</p> <p>At approximately 8:55 AM to 9:40 AM, Surveyor and Lead Program Case Manager (LPCM) A toured the facility where food items were stored in the following locations: pantry located next to employee offices, basement, pantry located off the kitchen, kitchen, and dining room.</p> <p>Pantry Off Employee Offices<br/>Surveyor and LPCM A observed 4 large shelving units that had shelves spanning from just above the floor to just below the ceiling with various food items in multiple quantities such as pre-popped popcorn, bags of chips, bags of nuts, boxes of noodles, jars of peanut butter, bags of rice, cans of evaporated milk, boxes of cereal, boxes of crackers, assortment of salad dressing containers, boxes of broth, boxes of taco shells, cans of vegetables, cans of enchilada sauce, and more. Surveyor observed a sample of food items from each shelf and noted the following items that exceeded their "Best if Used By" or "Use By" dates:<br/>-A can of sliced beets with stamped "BEST IF USED BY 29 JAN 2024"<br/>-A can of evaporated milk with stamped "Best if</p> | {N 452}                                                                               |                                                                                                                          |                                                                |

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| {N 452}                                                       | <p>Continued From page 3</p> <p>used by: Jul 27 2023" and a handwritten 1/08/24.<br/>-A container of Kraft Chunky Blue Cheese dressing with a label that said "SHAKE WELL REFRIGERATE AFTER OPENING BEST WHEN USED BY" with stamped "09AUG2024" and a handwritten date of 8/14/24.<br/>-A box of Cheerios with a label "BEST If Used By 14 JUL 2024" and handwritten date 9-9-24.<br/>-A box of Post Disney 100 fruity cereal with a stamped label "MAY2424" and a handwritten date of "8-17."<br/>-A box of corn taco shells with stamped "USE BY 06 26 24" and handwritten date "7-29"<br/>-A box of Triscuit crackers with a label BEST WHEN USED BY and stamped "02AUG2024" and handwritten date "8-21-24."<br/>-A box of Triscuit dill, sea salt and olive oil crackers with a label BEST WHEN USED BY and stamped "19JAN24" and handwritten date "4/2/24."<br/>-A box of Triscuit sea salt with a label BEST WHEN USED BY and stamped "30NOV23" and handwritten date "4/2/24."<br/>-A jar of Miracle Whip with label BEST WHEN USED BY "03 MAY 2024" and handwritten "07-15."</p> <p>At approximately 9:00 AM, LPCM A stated residents check in the food and label the items with permanent marker of the day they arrive to the facility and if they have a second date, it's the date the food item was opened. LPCM A stated the food was supposed to be checked weekly for expirations. Surveyor inquired the last time the food was checked for quality and expiration and LPCM A stated it was due to be checked.</p> <p>Basement Chest Freezer and Refrigerator/Freezer Combo<br/>Surveyor and LPCM A observed a chest freezer</p> | {N 452}                                                                     |                                                                                                                          |  |                                                                |

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| {N 452}                                                       | <p>Continued From page 4</p> <p>with various packaged meats. Surveyor noted the packages of meat were not in stacks or in an organized manner, but all thrown in on top of one another in a disheveled fashion. Surveyor noted a large open blue bag with a hole on the side with frozen rib meat in it. LPCM A stated "this shouldn't be in here" and removed the bag, indicating s/he was going to dispose of it. Surveyor noted some meat packages had rips, tears, and dings to the plastic and Styrofoam packaging. Surveyor observed a sample of meats and noted the following:</p> <ul style="list-style-type: none"> <li>-A package of Pork rib chop center cut with visible frost on the surface of the meat and package with label "BEST IF USED BY: 09.04.24."</li> <li>-A package of Pork riblets with label "BEST IF USED BY: 09.01.24."</li> <li>-A package of Pork rib chop with visible frost on the surface of the meat with label "BEST IF USED BY: 09.04.24."</li> <li>-A plastic container of turkey breast deli meat with labels "KEEP REFRIGERATED - FULLY COOKED" and date "10 JUL 2024."</li> </ul> <p>Surveyor observed a refrigerator/ freezer combo with various packaged meats and cheeses, observed the labels on a sample and noted the following:</p> <ul style="list-style-type: none"> <li>-2 packages of mozzarella sliced cheese with label "USE BY 08/04/2024" and handwritten "08-12."</li> <li>-A package of Kretschmar London broil roast beef with label "BEST IF USED BY: 07.04.24."</li> </ul> <p>Pantry Off Kitchen</p> <p>Surveyor and LPCM A observed multiple shelves on the right and back wall of the pantry spanning from above the floor to near the ceiling with cans of vegetables, jars of peanut butter, rice, flour, condiments, noodles, vinegar, and other</p> | {N 452}                                                                     |                                                                                                                          |  |                                                                |

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| {N 452}                                                       | <p>Continued From page 5</p> <p>non-perishable items. Surveyor noted a large bag of flour on a shelf that was rolled and not sealed. Surveyor noted the following food items that exceeded their Best If Used By dates:</p> <ul style="list-style-type: none"> <li>-An open jar of peanut butter with a permanent marker circled stamped "Best By JUL/05/2024."</li> <li>-A can of diced tomatoes and green chilies with stamped dated "BEST BY MAY 22 2024" and handwritten date "4/21/24."</li> <li>-A box of Froot Loops with stamped date "JUL 24 2024." The box was unsealed, open, and the bag of cereal was rolled inside the box.</li> <li>-A container of horseradish with label "BEST WHEN USED BY 06AUG2024."</li> <li>-A jar of mango chutney with label "07JL2024."</li> </ul> <p>Surveyor and LPCM A observed 2 side by side refrigerators and noted in the right refrigerator an uncovered, unlabeled mixing bowl of what LPCM A identified as bacon lard. Surveyor observed LPCM A take the bowl of lard out of the refrigerator and put it on the counter in the kitchen. Surveyor observed LPCM A take a bag of unknown food and 2 other unsealed unidentified food items out of the refrigerator, throw them away, and stated "they [residents] know they are not supposed to store food like that." In the left refrigerator, Surveyor observed 15 cartons of eggs.</p> <ul style="list-style-type: none"> <li>-1 carton with a handwritten date "9-3."</li> <li>-1 carton with a stamped label "BEST BY 07-12-2024" and handwritten "7/29."</li> <li>-1 carton with handwritten "9-1-24."</li> <li>-2 cartons with handwritten "9-9-24."</li> <li>-1 carton with stamped label "BEST BY JULY 23 24" and handwritten "9-9-24."</li> <li>-1 carton with stamped label "USE BY 09/12/24" and handwritten "9-9-24."</li> <li>-1 carton with stamped "05 2 24."</li> </ul> | {N 452}                                                                               |                                                                                                                          |                                                                |

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| {N 452}                                                       | <p>Continued From page 6</p> <p>Kitchen<br/>Surveyor and LPCM A observed a refrigerator and freezer combo and noted:<br/>-A bag of pepper cheese with label "BEST IF USED BY 08.14.24."<br/>-An unsealed bag of smoked turkey deli meat with stamped label "SELL BY AUG 16 24" and handwritten "08-14-24."<br/>-A bag of honey baked brown sugar ham with label "BEST IF USED BY: 08.18.24."<br/>-An uncovered, unlabeled, half wrapped approximate 1 tablespoon of butter in the refrigerator door<br/>-A large bag of unsealed jalapeno peppers<br/>-An unsealed bag of bacon<br/>-An unlabeled container of an unidentified yellow leftover<br/>-2 loose unpackaged jalapenos in the freezer<br/>-An unsealed bag of sausage patties in the freezer</p> <p>Surveyor and LPCM A observed a second refrigerator and noted a temperature gauge measuring the temperature of the refrigerator at approximately 47 degrees Fahrenheit and a package of salami with stamped label "USE BY FEB 02 2024." LPCM A verified the temperature reading. Surveyor noted a sandwich bag of 2 jalapenos that had growing gray fuzz and mold-like appearance to them and observed LPCM A throw the bag away. LPCM A stated s/he could smell something foul or spoiled in or near the refrigerator.</p> <p>On one of the kitchen counters, Surveyor observed a box of oatmeal with stamped date "JUL 11 24" and an open jar of peanut butter with stamped date "04/03/2024" and handwritten date "8/5."</p> | {N 452}                                                                     |                                                                                                                          |  |                                                                |

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>0017565</b>           | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____                                                   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>R-C<br/>09/16/2024</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>RYAN COMMUNITY INC</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>913 S WEST AVE<br/>APPLETON, WI 54915</b> |                                                                                                                          |                                                                |
| (X4) ID<br>PREFIX<br>TAG                                      | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ID<br>PREFIX<br>TAG                                                                   | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE                                       |
| {N 452}                                                       | <p>Continued From page 7</p> <p>Dining Room<br/>In the dining room, Surveyor observed an area of snacks and noted a bag of pecan pie mix with stamped date "BEST BY 14 JULY 2024" and an opened box of Triscuit crackers with label "BEST WHEN USED BY 30NOV23."</p> <p>At approximately 9:42 AM, Surveyor inquired about the provider's food storage policy. LPCM A provided Surveyor with a photocopy of DHS 83.41 Food service regulations with staff signatures on the bottom of the page. Surveyor noted at least 5 staff signatures and dates from 2023. LPCM A stated only 2 of the staff listed as reviewing the food regulations were still employees at the facility and stated all staff should be trained on it again. Surveyor inquired about the CBRF's standard of practice for checking the quality of the food that exceeded the use by/best by dates and LPCM A indicated they did not have anything specifically identified. LPCM A acknowledged various amounts of food being served and stored for future serving were past the "Used By" dates and various food items were not stored in a sanitary manner.</p> | {N 452}                                                                               |                                                                                                                          |                                                                |