

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0017970	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 01/08/2025
NAME OF PROVIDER OR SUPPLIER ROLLING MEADOWS OF STRUM		STREET ADDRESS, CITY, STATE, ZIP CODE 208 ELM STREET PO BOX 182 STRUM, WI 54770		
(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 01/08/2025, Surveyors conducted 3 complaint investigations, and 2 verification visits at Rolling Meadows of Strum. One deficiency was identified. The deficiency was a repeat deficiency. See Statement of Deficiency (SOD) ZY4715 The complaints were unsubstantiated. Under statutory provisions of Wis. Stat. ch 50, a \$200 revisit fee is being assessed. Census: 18	{N 000}		
{N 525}	83.47(2)(d) Fire drills. Fire drills. 1. Fire evacuation drills shall be conducted at least quarterly with both employees and residents. Drills shall be limited to the employees scheduled to work at that time. Documentation shall include the date and time of the drill and the CBRF ' s total evacuation time. The CBRF shall record residents having an evacuation time greater than the time allowed under s. HFS 83.35(5) and the type of assistance needed for evacuation. Fire evacuation drills may be announced in advance. 2. At least one fire evacuation drill shall be held annually that simulates the conditions during usual sleeping hours. Fire evacuation drills may be announced in advance. Drills shall be limited to the employees scheduled to work during the residents ' normal sleeping hours.	{N 525}		

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

TITLE

(X6) DATE

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{N 525}	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interview, the provider did not conduct fire evacuation drills with both employees and residents quarterly. This is a repeat deficiency. See Statement of Deficiency (SOD) ZY4715, dated 02/23/2024. Findings include: The provider is licensed to serve up to 19 residents in the following client groups: advanced aged, terminally ill, physically disabled, and irreversible dementia/Alzheimer's. On 01/08/2025, Surveyors reviewed the providers documentation of quarterly fire drills for the last half of 2024. There was a documented fire drill on 08/04/2024 at 10:30 PM. The description stated, "Fire drill done without alarm during NOC (night) shift. 4 resident [sic] evacuated less than 4 minutes." The second page of the fire drill sheet was titled "Emergency Evacuation of Residents" and listed resident rooms and names. The sheet showed evacuation times for the 4 residents that evacuated, stated refused next to 3 of the residents, and noted nothing next to 6 residents. Surveyors also reviewed documentation of training on fire drills in December but no actual fire drill was performed with all residents and staff. On 01/08/2025 at 1:00 PM, Surveyors interviewed Director A about fire drill protocol. Director A stated that they perform fire drills but it was not mandatory that all residents participate. Director A stated that some residents don't like to evacuate, or it gave them anxiety, so they made participation optional. Director A acknowledged the importance of all residents and staff	{N 525}		

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{N 525}	Continued From page 2 participating in fire drills at least quarterly. Director A also acknowledged the importance of documenting the CBRF's total evacuation time.	{N 525}			