

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525605	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/28/2024
NAME OF PROVIDER OR SUPPLIER Meadow View Health Services		STREET ADDRESS, CITY, STATE, ZIP CODE 3613 S 13th St Sheboygan, WI 53081	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49010</p> <p>Based on observation, staff interview, and record review, the facility did not ensure meal items were prepared in a method that conserved the nutritive value and did not ensure menus and serving sizes were followed. This practice had the potential to affect more than 4 residents residing in the facility. One resident received nutrition exclusively via tube feeding.</p> <p>Kitchen staff did not follow a recipe to ensure the nutritive value was maintained during food preparation. In addition, staff did not consistently follow the menu or serving sizes.</p> <p>Findings include:</p> <p>The facility's contracted service's Menu policy, revised 9/2017, indicates: Menus will be planned in advance to meet the nutritional needs of the residents in accordance with national guidelines .Menu cycles will include standardized recipes.</p> <p>The facility's contracted service's Food; Quality and Palatability policy, revised 2/2023, indicates: The Dining Services Director and Cook(s) are responsible for food preparation. Menu items are prepared according to the menu, production guidelines, and standardized recipes .4. The Cook(s) prepare food in accordance with the recipes, and season for region and/or ethnic preferences as appropriate.</p> <p>According to the publication All About Recipes, Part II from the College of Agriculture, Biotechnology and Natural Resources [NAME], A., and [NAME], S. 2021, It is important to follow a recipe to ensure accurate nutrition content, which is important for schools, hospitals, and nursing homes.</p> <p>During a continuous kitchen observation that began at 9:35 AM on 8/26/24, Surveyor observed [NAME] (CK)-F free-pour ingredient into a metal container and mix them together. Surveyor interviewed CK-F who stated CK-F was making rice pilaf for lunch. When asked if CK-F followed a recipe, CK-F stated CK-F didn't need a recipe because CK-F knew what the basic ingredients were. CK-F said CK-F was guesstimating the amounts of the ingredients and stated rice pilaf was a soup base with rice, onions, peas, and other ingredients. When Surveyor asked how much of each item CK-F was supposed to add per the recipe, CK-F stated CK-F did not know. CK-F was unsure how many servings of rice pilaf CK-F had made and was unsure of the serving size. CK-F pointed to a recipe book on the counter and stated the book contained the recipe for rice pilaf.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 8/27/24 at 12:09 PM, Surveyor interviewed District Manager (DM)-C who stated kitchen staff were in need of training and DM-C would work with the team to ensure they received it. DM-C stated DM-C expects kitchen staff to use recipes to maintain nutritional values during food preparation and expects staff to follow the facility's policy for safe food preparation and serving.</p> <p>During a lunch observation on 8/27/24 at 12:17 PM, Surveyor observed Dietary Manager (DM)-G make instant mashed potatoes. DM-G poured unmeasured mashed potato flakes into a pitcher and added hot water from the coffee machine. DM-G stirred the top of the mashed potatoes, added more water, and stirred the potatoes again. Surveyor noted the bottom 1-2 inches of the pitcher contained dry potato flakes that were not mixed with water. DM-G placed the pitcher in the microwave, checked the temperature of the potatoes when they were finished, and placed the pitcher of mashed potatoes in the steam table for serving. Surveyor noted DM-G did not follow a recipe during the process.</p> <p>On 8/27/24 at 12:20 PM, Surveyor interviewed DM-G who stated DM-G made the mashed potatoes for residents with pureed food diets and the potatoes were ready to be served. When Surveyor asked if DM-G used a recipe to make the potatoes, DM-G stated, No. They are instant potatoes. Surveyor asked DM-G to remove the pitcher of mashed potatoes from the steam table so DM-G could observe the bottom of the pitcher which still contained dried flakes. DM-G verified the potatoes were not fully mixed. DM-G spooned mashed potatoes from the top of the pitcher and put them in bowls. DM-G then put lids on the bowls, put the bowls in the steam table without measuring the serving size, and put the pitcher with dried potato flakes in the dishwashing area.</p> <p>Surveyor noted the 8/27/24 lunch menu for pureed diets included pureed beef tips in gravy, pureed noodles, soft cooked buttered diced carrots, a pureed wheat roll, and pureed frosted banana cake.</p> <p>During an observation on 8/27/24 at 12:23 PM, Surveyor observed CK-F put mashed potatoes topped with pureed beef tips, applesauce, and carrots on two plates. Surveyor interviewed CK-F who stated CK-F served residents on pureed diets mashed potatoes instead of pasta because it was easier than pureeing noodles which CK-F had difficulty with. When asked if there was a recipe for pureed noodles, CK-F stated the noodles didn't turn out. CK-F verified CK-F gave residents on pureed diets applesauce instead of pureed banana cake which was listed on the menu. CK-F stated there were two residents on pureed diets and confirmed the residents did not ask for the food item changes.</p> <p>On 8/27/24 at 2:15 PM, Surveyor interviewed Nursing Home Administrator (NHA)-A who stated NHA-A expects kitchen staff and management to follow the facility's food preparation policy to ensure the safety of the food served to residents.</p> <p>On 8/28/24 at 10:17 AM, Surveyor interviewed Regional Manager (RM)-D who stated RM-D expects kitchen staff to follow recipes when they cook and prepare food and follow the facility's policy for safe food preparation and serving. RM-D provided the recipes for instant mashed potatoes and rice pilaf and provided Surveyor with copies of the applicable kitchen policies that staff are expected to follow regarding food preparation.</p> <p>On 8/28/28 at 10:23 AM, Surveyor interviewed RM-E who stated RM-E expects kitchen staff to follow the facility's policy for safe food preparation and serving.</p>		