STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	525668	A. Building B. Wing	05/20/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Newcastle Place	12600 N Port Washington Rd #300 Mequon, WI 53092

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)
F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. Based on observation, staff interview, and record review the facility did not ensure food was stored and prepared in a safe and sanitary manner. This practice had the potential to affect all 38 residents residing in the facility. Hand hygiene was not appropriately completed during dishwashing.Food temperatures were not consistently completed.The facility did not have logs for the 3-compartment sink and sanitizing buckets. Bowls in the kitchen were not stored upside down or covered. The stove was not thoroughly cleaned.Findings include:On 5/18/26 at 9:35 AM, Surveyor completed an initial kitchen tour. During the tour, Dietary Manager (DM)-D indicated the facility follows the Wisconsin Food Code.Hand Hygiene:The Wisconsin Food Code documents at Chapter 2 Personal Cleanliness 2-301.14 When to Wash: Food employees shall clean their hands and exposed portions of their arms as specified under 2-301.12 immediately before engaging in food preparation including working with exposed food, clean equipment and utensils, and unwrapped single-service and single-use articles and: (E) After handling soiled equipment or utensils . On 5/18/26 at 10:30 AM, Surveyor observed Dietary Aid (DA)-F wash dishes. DA-F put dishes away on the clean side, walked to the dirty side, grabbed the sprayer, and pushed a rack of trays through the dishwasher. DA-F then walked to the clean side and removed clean plate covers from a rack to put away. DA-F did not complete hand hygiene when going from dirty to clean. DM-D was informed of the observation and acknowledged hand hygiene should have been completed. Temperatures/Logs: The Wisconsin Food Code documents at 1-106.14 Conformance with Approved Variance and HACCP Plan Procedures: (B) Maintain and provide to the regulatory authority or the department upon request, records specified under section 1-106.12 that demonstrate that the following are routinely employed: (1) Procedure for monitoring the critical control points; (2) Monitoring of the critical control points. The facility's Food Service Temperatures policy, revised 4/14/20, indicates: Team members setting up the service line and serving food must follow these procedures .4. Record the temperatures on the temperature log. During the initial kitchen tour on 5/18/26, Surveyor requested to see the facility's food temperature logs. Surveyor reviewed the May 2026 log from 5/1/26 through 5/17/26 and noted the following:~ 5/1/26: There were no breakfast temperatures; 5/2/26: There were no supper temperatures; 5/4/26: There were no lunch or dinner temperatures; 5/5/26: There were no temperatures for any of the meals; 5/6/26: There were no cooking temperatures; 5/7/26: There were no lunch or dinner temperatures. Surveyor noted each day's packet was at least 15 pages long and had pages of items with no temperatures. During an interview with DM-D, DM-D stated the list contained all of the ingredients and temperatures were only completed for food items served.The Wisconsin Food Code documents at Chemical Sanitizer Section 3-3014.14 Wiping Cloths, Use Limitation: Clothes in-use for wiping counters and other equipment surfaces shall be: (1) Held between uses in a chemical sanitizer solution at a concentration specified under 4-501.114 The Wisconsin Food Code documents at 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration, and Hardness: A chemical sanitizer used in a sanitizing solution for a manual or mechanical operation at contact times specified shall meet the criteria specified in S 7-204.11 sanitizers. Criteria, shall be used in accordance with the EPA-registered label use instructions . (continued on next page)

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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F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	During the initial kitchen tour on 5/8/26, Surveyor asked if there were logs for the sanitizing buckets and the 3-compartment sink. DM-D could not find the logs and asked DA-F who indicated there weren't any. DM-D acknowledged there should be logs.Bowls: The Wisconsin Food Code documentas at 3-305.11 Food Storage: Food shall be protected from contamination by storing the food: (2) Where it is not exposed to splash, dust, or other contamination . During the initial kitchen tour on 5/18/26, Surveyor observed 2 bins of soup bowls on a shelf. The bowls were haphazardly placed in the bin. Some of the soup bowls were facing upward and were not covered. DM-D acknowledged the bowls should be covered. Equipment: The Wisconsin Food Code documents at 4ˆ601.11 Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils: (C) Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris. During the initial kitchen tour on 5/18/26, Surveyor observed the inside of the oven. The bottom of the oven contained black crusted build-up. The facility did not have a cleaning log. Chef (CHF)-F indicated the oven probably had not been cleaned over the weekend.

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F 0804 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, staff and resident interview, and record review, the facility did not ensure food was served at a palatable and appetizing temperature for 2 residents (R) (R3 and R68) of 3 sampled residents. On 5/18/26, R3 and R68 indicated lunch was served at room temperature and their meals were often not hot. An insulated cart and/or thermal plate warmers were not used to deliver meal trays to R3 and R68's unit. Findings include:Between 5/18/26 and 5/20/26, Surveyor reviewed R3's medical record. R3 was admitted to the facility on [DATE]. R3's Minimum Data Set (MDS) assessment, dated 4/28/26, stated R3 had a Brief Interview for Mental Status (BIMS) score of 15 out of 15, indicating intact cognition.Between 5/18/26 and 5/20/26, Surveyor reviewed R68's medical record. R68 was admitted to the facility on [DATE]. R68's MDS assessment, dated 5/12/26, had a BIMS score of 15 out of 15, indicating intact cognition.On 5/18/26 at 11:36 AM, Surveyor observed [NAME] (CK)-C temp food in the steamtable for lunch service. The menu was pot roast, fish, mashed potatoes, green beans, creamed spinach, veggie soup, and cauliflower cheese soup. All food holding temperatures met the standards at that time.On 5/18/26 at 11:51 AM, CK-C started to plate food for R3 and R68's wing. Surveyor noted insulated plate bottoms were not used and resident meal trays for the wing were placed on an open 4-wheel cart. There was not an insulated cart for food delivery and all residents ate in their rooms.On 5/18/26 at 12:01 PM, the cart for R3 and R68's wing left the kitchen.On 5/18/26 at 12:19 PM, Surveyor observed R3 receive the last tray on the cart.On 5/18/26 at 12:20 PM, Surveyor interviewed R68 whose room was at the end of the hallway. R68 was the second to last resident to receive a meal tray. R68 indicated R68's meal was barely warm. R68 indicated meals often are not hot when served, especially breakfast. On 5/18/26 at 12:21 PM, Surveyor interviewed R3 whose room was also at the end of the hallway. R3 was the last resident on the wing to receive a meal tray. R3 indicated R3's food was room temperature. R3 indicated food often isn't hot when it is received. On 5/18/26 at 2:11 PM, Surveyor interviewed DM-D and shared the observation that CK-C did not use insulated bottoms and an insulated cart was not available for staff to help with temperature control. Surveyor also informed DM-D there was approximately 28 minutes betweeen the time the first and last trays were served on the unit and if food was not held hot, there was potential for it to become cold. At that time, CK-E entered the room and stated staff had been asking for an insulated cart to help with food temperature control on the unit and it would be helpful to have one.