STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0021202	A. BUILDING: _____ B. WING _____	R-C 01/06/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
KINDRED HEARTS COTTAGE GROVE	325 W COTTAGE GROVE ROAD COTTAGE GROVE, WI 53527

(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 01/06/2026, Surveyor conducted a verification visit at Kindred Hearts of Cottage Grove, a CBRF in Cottage Grove. Three deficiencies were identified. Two deficiencies were repeat deficiencies - See Statement of Deficiency (SOD) 0QSC11, dated 09/10/2025. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 13	{N 000}		
{N 352}	83.32(3)(h) Rights of Residents: Receive medication In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Receive medication. Receive all prescribed medications in the dosage and at intervals prescribed by a practitioner. The resident has the right to refuse medication unless the medication is court ordered. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 4 residents reviewed received medication as prescribed. Resident 2 received his/her Metoprolol when the medication should have been held. Resident 7 received his/her Carvedilol when the medication should have been held. Resident 5 received sliding scale Humalog 100 unit/ml when s/he should not have received any sliding scale insulin.	{N 352}		

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

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{N 352}	Continued From page 1 This is a repeat deficiency. See Statement of Deficiency (SOD) 0QSC11, dated 09/10/2025. Findings include: On 01/06/2026, Surveyor conducted a verification visit and reviewed resident records. The following concerns regarding medications were identified: Example 1 - Resident 2: Resident 2 was admitted to the provider's facility on 09/02/2025. Resident 2's physician orders included Metoprolol 75 mg (Start Date: 11/24/2025) 2 times daily - Hold if systolic blood pressure is <110 or pulse is <60. Resident 2's medication administration record (MAR), dated 12/01/2025 to 01/06/2026, documented the following: - 12/05/2025 8:34 p.m. Pulse = 54, Metoprolol administered. *Per order, Metoprolol should have been held. - 12/14/2025 8:30 p.m. Pulse = 47, Metoprolol administered. *Per order, Metoprolol should have been held. Example 2 - Resident 7: Resident 7 was admitted to the provider's facility on 05/30/2025. Resident 7's physician orders included Carvedilol 3.125 mg (Start Date: 09/19/2025) - Take 2 times daily - Hold if systolic blood pressure is <100 or diastolic blood pressure is <60 and notify physician. Resident 7's MAR, dated 12/01/2025 to 01/06/2026, documented the following:	{N 352}		

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{N 352}	Continued From page 2 - 12/10/2025 8:26 a.m. Blood Pressure 104/56 - Carvedilol administered. *Per order, Carvedilol should have been held. - 12/15/2025 8:03 a.m. Blood Pressure: 124/56 - Carvedilol administered. *Per order, Carvedilol should have been held. Example 3 - Resident 5: Resident 5 was admitted to the provider's facility on 12/30/2025. Resident 5's physician orders included Humalog 100 unit/ml (Start Date: 12/30/2025) - Inject 3 times daily prior to meal, per sliding scale: <150=0 units, 151-200=2 units, 201-250=4 units, 251-300=6 units, 301-350=8 units and >351=10 units. Resident 5's MAR, dated 12/30/2025 to 01/06/2026, documented a blood sugar of 148 on 01/01/2026 at 11:48 a.m. with 2 units of Humalog 100 unit/ml administered. Per order, 0 units of sliding scale insulin should have been administered. On 01/06/2026 at approximately 12:00 p.m., Surveyor shared concerns regarding the management of Resident 2, Resident 7 and Resident 5's medications with Regional Director G and Director H. Director H confirmed medications noted by Surveyor. Regional Director G stated it was the responsibility of the administrator and regional nurse to oversee medication administration Director H stated follow up education would be completed with caregivers.	{N 352}		
N 415	83.37(2)(d) Documentation of medication administration. Documentation of medication administration. As	N 415		

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N 415	Continued From page 3	N 415		

required under s. DHS 83.42(1)(o), at the time of medication administration, the person administering the medication or treatment shall document in the resident record the name, dosage, date and time of medication taken or treatments performed and initial the medication administration record. Any side effects observed by the employee or symptoms reported by the resident shall be documented. The need for any PRN medication and the resident ' s response shall be documented.

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure the medication administration for 1 of 4 residents reviewed was accurately documented in the record. Resident 5's Humalog 100 unit/ml insulin was administered 8 times without the number of insulin units administered being recorded.

Findings include:

On 01/06/2026, Surveyor conducted a verification visit and reviewed resident records. Resident 5 was admitted to the provider's facility on 12/30/2025. Resident 5's physician orders included Humalog 100 unit/ml (Start Date: 12/30/2025) - Inject 3 times daily prior to meal, per sliding scale: <150=0 units, 151-200=2 units, 201-250=4 units, 251-300=6 units, 301-350=8 units and >351=10 units. Resident 5's medication administration record (MAR), dated 12/30/2025 to 01/06/2026, noted the following concerns:

- 12/31/2025 4:38 p.m. Blood Sugar = 168,

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N 415	Continued From page 4 Amount of insulin administered was not documented. - 01/02/2026 7:41 a.m. Blood Sugar = 202, Amount of insulin administered was not documented. - 01/02/2026 12:50 p.m. Blood Sugar = 159, Amount of insulin administered was not documented. - 01/02/2026 4:50 p.m. Blood Sugar = 267, Amount of insulin administered was not documented. - 01/03/2026 7:24 a.m. Blood Sugar = 239, Amount of insulin administered was not documented. - 01/03/2026 11:20 a.m. Blood Sugar = 239, Amount of insulin administered was not documented. - 01/03/2026 4:17 p.m. Blood Sugar = 245, Amount of insulin administered was not documented. - 01/04/2026 4:16 p.m. Blood Sugar = 258, Amount of insulin administered was not documented. On 01/06/2026 at approximately 12:00 p.m., Surveyor shared concern with Regional Director G and Director H that Resident 5's record documented several administrations of his/her Humalog 100 unit/ml sliding scale without the number of units being documented. Director H confirmed Surveyor's observation and stated follow up education would occur with caregivers.	N 415		
{N 431}	83.38(1)(g) Health monitoring. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the	{N 431}		

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{N 431}	Continued From page 5 resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Health monitoring. 1. The CBRF shall monitor the health of residents and make arrangements for physical health, oral health or mental health services unless otherwise arranged for by the resident. Each resident shall have an annual physical health examination completed by a physician or an advanced practice nurse as defined in s. N 8.02(1), unless seen by a physician or an advanced practice nurse as defined in s. N 8.02(1) more frequently. 2. When indicated, a CBRF shall observe residents ' food and fluid intake and acceptance of diet. The CBRF shall report significant deviations from normal food and fluid intake patterns to the resident ' s physician or dietician. 3. The CBRF shall document communication with the resident ' s physician and other health care providers, and shall record any changes in the resident ' s health or mental health status in the resident ' s record. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the health of 4 of 4 residents reviewed was monitored and changes documented. Resident 5's heart rate was not monitored as ordered prior to the administration of Verapamil. Resident 6's physician was not notified of 2 blood sugars greater than 350. Resident 7's physician was not notified of 4 blood	{N 431}		

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{N 431}	Continued From page 6	{N 431}		

pressures outside parameters. Resident 7's weight was not taken daily, and management was not notified of weight gains.
Resident 2's weights were not taken daily, and management was not notified of weight gains.

This is a repeat deficiency. See Statement of Deficiency (SOD) 0QSC11, dated 09/10/2025.

Findings include:

On 01/06/2026, Surveyor conducted a verification visit and reviewed resident records. The following concerns were identified:

Example 1 - Resident 5:

Resident 5 was admitted to the provider's facility on 12/30/2025. Resident 5's physician orders included Verapamil 40 mg (Start Date: 12/30/2025) 3 times daily - Hold for heart rate less than 60. Resident 5's medication administration record (MAR), dated 12/30/2025 to 01/06/2026, documented 16 administrations of Verapamil without documentation that his/her heart rate was monitored prior to administration.

On 01/06/2026 at 11:28 a.m., Surveyor interviewed Caregiver I, who had administered Resident 5's medications earlier in the morning. Surveyor asked Caregiver I if s/he monitored Resident 5's heart rate prior to administration of the Verapamil. Caregiver I replied, "No," and explained that the provider's electronic charting system did not prompt him/her to check the heart rate.

On 01/06/2026 at approximately 12:00 p.m., Surveyor shared concern with Regional Director G

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{N 431}	Continued From page 7	{N 431}		

and Director H that Resident 5's Verapamil was administered without his/her heart rate being monitored. Director H confirmed Surveyor's concern and stated the provider's electronic monitoring system was just corrected to now prompt caregivers to check Resident 5's heart rate.

Example 2 - Resident 6:

Resident 6 was admitted to the provider's facility on 09/08/2025 with diagnosis of diabetes. Resident 6's physician orders included Lantus Solostar 100 units/ml (Start Date: 10/30/2025 / End Date: 01/06/2026) - Inject 26 unites daily - Hold if blood sugar (BS) is under 100 and notify physician of BS over 350. Resident 6's MAR, dated 12/01/2025 to 01/06/2026, documented a BS of 354 on 12/06/2025 and a BS of 379 on 12/08/2025. Resident 6's record did not include documentation indicating Resident 6's physician was notified of blood sugars greater than 350. On 01/06/2026 at approximately 12:00 p.m., Surveyor shared concern with Regional Director G and Director H that Resident 6's record did not include documentation indicating his/her physician was notified of blood sugars greater than 350. Director H followed up with Administrator F and confirmed physician notifications did not occur. Director H stated the provider would educate caregivers regarding notifications and updated Surveyor that Resident 6's blood sugar checks were discontinued on 12/18/2025.

Example 3 - Resident 7:

Resident 7 was admitted to the provider's facility on 05/30/2025. Resident 7's physician orders

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{N 431}	Continued From page 8	{N 431}		

included Carvedilol 3.125 mg (Start Date: 09/19/2025) - Take 2 times daily - Hold if systolic blood pressure is <100 or diastolic blood pressure is <60 and notify physician. Resident 7's MAR, dated 12/01/2025 to 01/06/2026, identified the following dates when Resident 7's physician should have been notified of a blood pressure outside parameters:

- 12/10/2025 8:26 a.m. 104/56
- 12/14/2025 5:45 p.m. 60/40
- 12/15/2025 8:03 a.m. 124/56
- 12/23/2025 4:35 p.m. 113/55

Resident 7's MAR also documented the need to weigh resident each morning before breakfast, starting 12/17/2025. The MAR documented that management was to be notified of a weight gain of 3 lbs. or more in one day. Resident 7's MAR, dated 12/17/2025 to 01/06/2026, documented the following concerns:

- Weights were not taken on 12/17/2025, 12/18/2025, 12/21/2025, 12/22/2025 and 01/02/2026.
- An increase greater than 3 lbs. was noted from 12/25/2025 223 lbs. to 12/26/2025 227.1 lbs. with no documentation that management was notified.

On 01/06/2026 at approximately 12:00 p.m., Surveyor shared concern with Regional Director G and Director H that Resident 7 had 4 occurrences of a blood pressure reading that would have required physician notification, yet documentation did not indicate Resident 7's physician was notified. Surveyor also reviewed concern that Resident 7's weights were not taken daily and documentation did not indicate management was

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{N 431}	Continued From page 9	{N 431}		

made aware of a weight gain of greater than 3 lbs. in 1 day. Director H checked Resident 7's record and confirmed that physician notifications did not occur. Director H added that the provider had issues with getting their scale calibrated resulting in some missed weights.

Example 4 - Resident 2:

Resident 2 was admitted to the provider's facility on 09/02/2025. Resident 2's MAR documented the need to weigh resident each morning before breakfast, starting 12/17/2025. The MAR documented that management was to be notified of a weight gain of 3 lbs. or more in one day or 5 lbs. or more in 7 days. Resident 2's MAR, dated 12/17/2025 to 01/06/2026, documented the following concerns:

- Weights were not taken on 12/17/2025, 12/18/2025, 12/21/2025, 12/23/2025 and 12/24/2025.
- Increases were noted on the following dates with no documentation of management being notified: 12/19/2025 110.4 lbs. to 12/20/2025 288 lbs., 12/22/2025 252 lbs. to 12/29/2025 275 lbs., 12/29/2025 275 lbs. to 12/30/2025 293.3 lbs., 01/02/2026 189 lbs. to 01/03/2025 286 lbs. and 01/04/2026 286.2 lbs. to 295 lbs.

On 01/06/2026 at approximately 12:00 p.m., Surveyor shared concern with Regional Director G and Director H that Resident 2's weights were not monitored daily with notifications made to management regarding weight gains. Director H confirmed Surveyor's concern and stated the provider had issues getting the scale calibrated and education needed to be completed with

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{N 431}	Continued From page 10 caregivers regarding notifications.	{N 431}		