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 05/13/2026

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

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{N 000}	Initial Comments On 05/13/2026, Surveyor conducted a verification visit and complaint investigation at Kindred Hearts of Cottage Grove, a CBRF in Cottage Grove. Two deficiencies were identified. Both deficiencies were repeat deficiencies - See Statement of Deficiency (SOD) 0QSC11, dated 09/10/2025 and SOD 0QSC12, dated 01/06/2026. The complaint was substantiated. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 11	{N 000}		
N 415	83.37(2)(d) Documentation of medication administration. Documentation of medication administration. As 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	N 415		

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

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N 415	Continued From page 1	N 415		

administration for 1 of 4 residents reviewed was accurately documented in the record.

Caregivers documented administration of Vashe to Resident 8's wound 20 times from 05/01/2026 to 05/13/2026 when the medication was never available at the facility.

This is a repeat deficiency. See Statement of Deficiency (SOD) 0QSC12, dated 01/06/2026.

Findings include:

On 05/13/2026 at approximately 11:00 a.m., Surveyor reviewed Resident 8's record. Resident 8 was admitted to the provider's facility on 04/09/1949. Resident 8's medication administration record (MAR), dated 05/01/2026 to 05/13/2026, listed the following wound care: "Cleanse sacrum with Vashe, pat dry with dry gauze, apply zinc cream to sacrum, coccyx and buttocks 2 times daily and as needed for soiling and dislodgement." The MAR documented that the provider completed the wound care 20 times. Resident 8's progress notes documented that Resident 8's physician was contacted for alternate wound care products that were covered by insurance on 05/01/2026.

On 05/13/2026 at approximately 12:00 p.m., Caregiver L and Director K reviewed Resident 8's wound care that was being completed. Director K reported that wound care included Ammonium Lactate to lower extremities, Nystatin cream to skin folds and creases and zinc oxide to Resident 8's bottom. Surveyor asked if Vashe and dry gauze were utilized.

On 05/13/2026 at approximately 12:10 p.m., Director of Operations J reviewed notes from

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N 415	Continued From page 2 Former Administrator F that indicated Resident 8 refused the out of pocket cost of Vashe and Former Administrator F had contacted Resident 8's managed care organization to discuss. Director of Operations J was unable to locate documentation of new wound care orders. On 05/13/2026 at approximately 1:00 p.m., Surveyor reviewed concern with Director H, Director of Operations J and Director K that caregivers documented the administration of Vashe 20 times from 05/01/2026 to 05/13/2026 when the medication was never supplied. Director of Operations J took note of Surveyor's concern and confirmed caregivers documented the administration of a medication that was never supplied. Director of Operations J stated someone at the facility would have "signed off" on the orders to have them added to the MAR and that should not have occurred with the medication not being in supply.	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 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	{N 431}		

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{N 431}	Continued From page 3 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 observation, interview and record review, the provider did not ensure the health of 2 of 4 residents reviewed was monitored with arrangements made for physical health and changes in health documented in the resident record. Resident 7's weights were not monitored and recorded daily as ordered. Resident 8 did not have services arranged to meet his/her podiatry needs and monitoring and follow up of his/her wounds was not documented in his/her record. This is a repeat deficiency. See Statement of Deficiency (SOD) 0QSC11, dated 09/10/2025 and SOD 0QSC12, dated 01/06/2026. Findings include: On 05/13/2026 at approximately 11:00 a.m., Surveyor reviewed resident records and identified the following concerns:	{N 431}		

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{N 431}	Continued From page 4 Resident 7's Weights: On 05/13/2026 at approximately 10:00 a.m., Surveyor reviewed Resident 7's record. Resident 7 was admitted to the provider's facility on 05/30/2025 with diagnosis of congestive heart failure. Resident 7's physician orders included an order to check weight every morning before breakfast and update physician if there was a weight gain of 3 lbs or more in a day (Start Date: 02/25/2026). Resident 7's record, dated 04/05/2026 to 05/13/2026, documented his/her weight was not taken 04/14/2026 through 04/17/2026 and on 04/27/2026. Notations indicated Resident 7's weight was not taken 04/15/2026 through 04/17/2026 because the facility's scale was not working. On 05/13/2026 at approximately 1:00 p.m., Surveyor shared concern with Director H, Director of Operations J and Director K that Resident 7's weight was not monitored as ordered and that documentation for some dates indicated the facility scale was not working. Director of Operations J made note of Surveyor's concern. Director of Operations J looked at the scale in the room Surveyor was in and stated s/he wasn't aware of issues. Neither Director H, nor Director K were covering the facility during the missed weights. Resident 8's Podiatry Care: On 05/13/2026 at 9:20 a.m., Surveyor interviewed Resident 8 in his/her room. Surveyor observed Resident 8's lower extremities were extremely dry, with flakes of dry skin covering the floor around Resident 8's recliner and leading down his/her hallway to the bathroom and exit of his/her room. Surveyor observed Resident 8's toenails to	{N 431}		

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{N 431}	Continued From page 5	{N 431}		

be thick, extending approximately ¼ inch over his/her toes and beginning to curl under. Surveyor asked Resident 8 when his/her toenails had last been cared for. Resident 8 stated s/he wasn't sure.

On 05/13/2026 at approximately 11:00 a.m., Surveyor shared an image of Resident 8's lower extremities to Director H, Director of Operations J and Director K. Director K gasped. Director of Operations J stated s/he would follow up to clarify who managed Resident 8's podiatry needs.

On 05/13/2026 at 11:40 a.m., Director of Operations J stated Resident 8 was not on the list to be seen by the provider's podiatrist. Director of Operations J stated since Resident 8 had a diagnosis of diabetes, the provider should have arranged for him/her to be seen by podiatry. Director H stated s/he would ensure Resident 8 was added to the list for podiatry services.

Resident 8's Wounds:

On 05/13/2026 at 9:20 a.m., Surveyor interviewed Resident 8. Resident 8 stated his/her biggest concern was taking care of the sore on his/her bottom that had been around for months.

On 05/13/2026 at approximately 11:00 a.m., Surveyor reviewed Resident 8's record. Resident 8 was admitted to the provider's facility on 07/01/2025. Resident 8's progress notes, dated 04/05/2026 to 05/13/2026, documented the following:

- 04/28/2026: Resident has fluid leaking out of his/her right leg. Management informed.
- 04/29/2026: Resident has redness on arms, legs, chest and neck. The lower portion of

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resident's legs are covered with blisters and drainage is coming out of the blisters. Resident transferred to hospital via 911 for observation.
- 04/30/2026: Resident's leg is still draining.
- 05/01/2026: Physician contacted to prescribe alternative wound care products that are covered by insurance.
- 05/03/2026: When changing, new wounds noticed on his/her lower backside seem to have been bleeding.
- 05/04/2026: Resident's wound on coccyx has discharge and resident complains of discomfort. Home health called to check on resident's wound. Resident's physician called about wound on coccyx. Appointment scheduled for 05/07/2026.

Resident 8's most recent skin assessment was dated 04/01/2026 and did not reference concerns with Resident 8's lower extremities or coccyx. Resident 8's record included an After Visit Summary, dated 04/28/2026, that included orders to care for Resident 8's bilateral breasts and lower abdominal skin folds (Vashe moistened gauze, pat dry with dry gauze, apply moisture wicking fabric), bilateral lower extremities (cleanse with soap, rinse, dry and apply Ammonium lactate lotion) and sacrum (cleanse with Vashe, pat dry with dry gauze, apply zinc cream). Resident 8's record did not document any updated wound care following the 05/01/2026 call to Resident 8's physician or an After Visit Summary for the appointment scheduled 05/07/2026.

On 05/13/2026 at approximately 12:00 p.m., Surveyor interviewed Caregiver L regarding Resident 8's wound care. Caregiver L stated Resident 8 had a sore on his/her bottom that changed week by week depending on if Resident 8 refused cares. Caregiver L stated s/he currently

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{N 431}	Continued From page 7 completed cares under Resident 8's breasts, skin folds and sacral area. Caregiver L stated cares included creams, powder and paper towel. On 05/13/2026 at approximately 12:10 p.m., Surveyor shared concern with Director of Operations J and Director K that Resident 8 had wounds with no documentation indicating the wounds were being monitored with changes documented in the record. Director of Operations J acknowledged Surveyor's concern. Director K reached out to the company that provided home health services to clarify whether a RN had completed a visit related to Resident 8's wounds and was told Resident 8 was on home health services for therapies only. Director of Operations J stated the facility's RN denied awareness of Resident 8's wounds.	{N 431}		