STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016075	A. BUILDING: _____ B. WING _____	10/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GLARNER LODGE	900 GLARNER DR NEW GLARUS, WI 53574

(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
U 000	INITIAL COMMENTS On 10/07/2024, Surveyors conducted a standard survey at Glarner Lodge, a RCAC in New Glarus. Two deficiencies were identified. There is one repeat deficiency. See Statement of Deficiency (SOD) 8DKM12, dated 06/21/2022. Census: 20	U 000		
U 118	89.23(2)(a)2.c SERVICES SUFFICIENT SERVICES. Minimum required services. A residential care apartment complex shall have the capacity to provide all of the following services to all tenants, either directly or under contract: c. Nursing services: health monitoring, medication administration and medication management. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the medication management of 1 of 3 tenants reviewed was accurately documented. Tenant 1's medication administration record (MAR) documented the administration of Esomeprazole Magnesium,	U 118		

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

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U 118	Continued From page 1 which s/he did not receive. This is a repeat deficiency. See Statement of Deficiency (SOD) 8DKM12, dated 06/21/2022. Findings include: On 10/07/2024 at approximately 11:00 a.m., Surveyor reviewed Tenant 1's record. Tenant 1 was admitted to the provider's complex on 01/19/2022. Tenant 1's record indicated the provider managed Tenant 1's medications for him/her. Tenant 1's MAR, dated 09/01/2024 to 10/01/2024, documented Esomeprazole Magnesium 40 mg (Start Date: 08/11/2024) was not available for administration on 09/01/2024, 09/04/2024 through 09/06/2024 and 09/11/2024. The MAR documented Esomeprazole Magnesium 40 mg as administered on 09/02/2024, 09/03/2024 and 09/07/2024 through 09/10/2024. The MAR documented the medication was discontinued on 09/12/2024. On 10/07/2024 at approximately 1:10 p.m., Surveyor interviewed Administrator A regarding Tenant 1's Esomeprazole Magnesium 40 mg documented as unavailable on 5 days from 09/01/2024 through 09/11/2024. Administrator A stated the provider switched pharmacies on 09/01/2024 and as s/he reconciled orders and reviewed MARs s/he realized Tenant 1's Esomeprazole Magnesium was a "duplicate" of his/her Omeprazole 40 mg. Administrator A stated the 6 dates Tenant 1's Esomeprazole Magnesium was documented as administered would have been a documentation error because the medication was never available. On 10/07/2024 at approximately 3:30 p.m., Surveyor interviewed Pharmacist F with the	U 118		

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U 118	Continued From page 2 complex's pharmacy. Pharmacist F confirmed the Esomeprazole Magnesium had never been delivered to the provider's complex and would not have been available for administration.	U 118		
U 128	89.23(4)(a)1. SERVICES PROVIDER QUALIFICATIONS. Service providers. 1. Residential care apartment complex services shall be provided by staff who are trained in the services that they provide and are capable of doing their assigned work. Any service provider employed by or under contract to a residential care apartment complex shall meet applicable federal or state standards for that service or profession. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure all residential care apartment complex (RCAC) services were provided by staff that met all applicable state standards. Caregiver C, Caregiver D and Caregiver E provided RCAC services prior to meeting all training requirements. Findings include: On 10/07/2024, Surveyors reviewed 3 employee records provided by Director of Human Resources B to verify compliance with employee	U 128		

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U 128	Continued From page 3	U 128		

training requirements. The following concerns were identified:

- Caregiver C, employed 05/10/2024, did not have documented training or experience in physical, functional and psychological characteristics associated with aging or likely to be present in the tenant population and their implications for service needs.
- Caregiver D, employed 03/11/2024, did not have documented training or experience in physical, functional and psychological characteristics associated with aging or likely to be present in the tenant population and their implications for service needs. Caregiver D did not receive fire safety training until 07/25/2024 and first aid training until 07/22/2024, greater than 4 months after his/her date of hire.
- Caregiver E, employed 06/28/2023, did not have documented training or experience in physical, functional and psychological characteristics associated with aging or likely to be present in the tenant population and their implications for service needs until 11/16/2023, greater than 4 months after his/her date of hire. Caregiver E did not receive first aid training until 06/09/2024, nearly 1 year after his/her date of hire.

On 10/07/2024 at approximately 1:30 p.m., Surveyor reviewed concern with Administrator A and Director of Human Resources B that 3 of 3 caregivers reviewed did not have documentation of training or experience in all required training and/or received training months after their date of hire. Administrator A confirmed caregivers began completing caregiver duties and providing services to tenants upon hire and prior to completion of necessary trainings. Director of Human Resources B stated Caregiver C was still working on his/her trainings and did not comment

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U 128	Continued From page 4 on Caregiver D or Caregiver E's trainings. Director of Human Resources B made note to ensure all trainings were completed upon hire.	U 128		