STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0009330	A. BUILDING: _____ B. WING _____	01/22/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELIZABETH RESIDENCE NORTH	9329 S 48TH ST FRANKLIN, WI 53132

(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 01/22/2026, Surveyors completed a standard survey at Elizabeth Residence North. As a result of the survey, two deficiencies were identified. Census 32	N 000		
N 408	83.37(1)(i) PRN psychotropic medication. As needed (PRN) psychotropic medication. When a psychotropic medication is prescribed on an as needed basis for a resident, the CBRF shall do all of the following: 1. The resident ' s individual service plan shall include the rationale for use and a detailed description of the behaviors which indicate the need for administration of PRN psychotropic medication. 2. The administrator or qualified designee shall monitor at least monthly for the inappropriate use of PRN psychotropic medication, including but not limited to, use contrary to the individual service plan, presence of significant adverse side effects, use for discipline or staff convenience, or contrary to the intended use. 3. Documentation in the resident ' s record shall include the rationale for use, description of behaviors requiring the PRN psychotropic medication, the effectiveness of the medication, the presence of any side effects, and monitoring for inappropriate use for each PRN psychotropic medication given. This Rule is not met as evidenced by: Based on record review and interview, the provider did not include the rationale for use and a detailed description of the behaviors which indicate the need for administration of as needed (PRN) psychotropic medication for 1 (Resident 1) of 3 resident records reviewed.	N 408		

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

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N 408	Continued From page 1 Resident 1 was prescribed and administered hydroxyzine hydrochloride (Hcl) 25 milligrams (mg) for anxiety. Resident 1's ISP did not include the rationale for use and a detailed description of behaviors which indicated the need for administration of hydroxyzine Hcl. Findings include: On 01/22/2026, Surveyor reviewed Resident 1's resident records. Resident 1 was admitted on 04/14/2025. Resident 1 had a Physician Order for hydroxyzine Hcl (hydrochloride) 25 mg (milligrams) tablet to be taken as needed, with a start date of 01/06/2026. Resident 1's January 2025 medication administration record (MAR) indicated Resident 1 was administered hydroxyzine Hcl 25 mg on 01/18/2026 and 01/21/2026. Surveyor reviewed Resident 1's most current ISP, dated 05/16/2025. Resident 1's ISP did not address Resident 1's prescribed PRN psychotropic medication, hydroxyzine Hcl 25 mg, nor did it include the rationale for use and detailed description of behaviors which indicated the need for administration of PRN psychotropic medication. On 01/22/2026 at approximately 1:17 PM, Surveyors interviewed Nurse A and Administrative Assistant B. Nurse A is responsible for updating residents' ISPs annually and with any updates and/or change of conditions. Nurse A was not aware PRN psychotropic medications were to be included in the resident's ISP. Nurse A makes staff aware of any added or discharged PRN psychotropic medications in "staff huddles" and progress note. Nurse A will ensure all PRN psychotropic medications are added to residents' ISPs.	N 408		

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N 636	Continued From page 2	N 636		
N 636	83.59(1)(f) Exit passageways, stairways: width maintained All habitable floors shall have at least 2 exits providing unobstructed travel to the outside. Small class AA CBRFs licensed on or before the effective date of this section with no more than 2 habitable floors may have one exit from the second floor. Exit passageways and stairways to outside exits shall be at least 36 inches in width and maintained clear and unobstructed at all times. Exit passageways and stairways to outside exits shall be at least 32 inches in width in facilities licensed on or before the effective date of this section. In existing large facilities, the minimum corridor width shall be at least 4 feet. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 5 of 8 exits to/from the facility were unobstructed. Five of 8 exit doors had camouflaged murals to deter residents who may be exit seeking. The camouflaged murals had the ability to hinder residents from using the exit doors during an emergency. Findings include: The facility was licensed on 07/12/2001 as a non-ambulatory community based residential facility (CBRF) with a max capacity of 33 residents. The CBRF is licensed to care for residents with diagnoses related to advanced age and irreversible dementia/Alzheimer's. On 01/22/2026 at approximately 9:00 AM, Surveyors toured the physical environment with Administrative Assistant B. Surveyor observed five emergency doors to be painted with	N 636		

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N 636	Continued From page 3 camouflaged murals. Four of the 5 doors were identified to be delayed egress doors as each door had a sign that stated, "Push Door Until Alarm Sounds Door Can Open in 15 Sec." Two of the 5 doors were painted as if it was a brick wall. (Photos 1 and 3). Three of the 5 doors were painted as if it was a fireplace. (Photos 2, 4 and 5). The door handles and exits signs were visible and uncovered for 5 of the 5 doors. On 01/22/2026 at approximately 9:00 AM, Surveyor interviewed Administrative Assistant B. Administrative Assistant B reported the doors were painted prior to the change of ownership to deter residents who may be exit seeking. Administrative Assistant B acknowledged how the paintings could deter residents from using the door during an emergency.	N 636		