STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0013407	A. BUILDING: _____ B. WING _____	06/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AZURA MEMORY CARE BELOIT 8	2096 COLONY CT BELOIT, WI 53511

(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 06/07/2024, Surveyors conducted an abbreviated survey at Azura Memory Care Beloit 8. One deficiency was identified. Census: 6	N 000		
N 406	83.37(1)(g) Disposition of medications. Disposition of medications. 1. When a resident is discharged, the resident ' s medications shall be sent with the resident. 2. If a resident ' s medication has been changed or discontinued, the CBRF may retain a resident ' s medication for no more than 30 days unless an order by a physician or a request by a pharmacist is written every 30 days to retain the medication. 3. The CBRF shall develop and implement a policy for disposing unused, discontinued, outdated, or recalled medications in compliance with federal, state and local standards or laws. The CBRF shall arrange for the stored medications to be destroyed in compliance with standard practices. Medications that cannot be returned to the pharmacy shall be separated from other medication in current use in the facility and stored in a locked area, with access limited to the administrator or designee. The administrator or designee and one other employee shall witness, sign, and date the record of destruction. The record shall include the medication name, strength and amount. This Rule is not met as evidenced by: Based on observation, interview, and record review, the provider did not ensure when a	N 406		

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

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N 406	Continued From page 1	N 406		

resident is discharged, the residents medications shall be sent with the resident. Resident 1's medication was not sent with him/her upon discharge.

Findings include:

On 06/06/2024 at 9:27 AM, Surveyors observed the provider's refrigerator located inside the med room with Regional Nurse B. Surveyors observed 5 Lantus Solostar 100U/ML Insulin Pens with directions to inject subcutaneously 35 units daily with a dispensed dated of 10/04/2023 for Resident 1. Surveyors asked Regional Nurse B if Resident 1 was still admitted at the facility. Regional Nurse B stated "no" and did not know why Resident 1's insulin pens were stored inside the refrigerator.

On 06/07/2024, Surveyors reviewed Resident 1's record and identified the following:

Resident 1 was admitted to the facility on 01/31/2024 with diagnoses including type 2 diabetes and Alzheimer's. Resident 1 discharged on 04/21/2024.

Resident 1's physician orders documented: "Lantus Solostar 100U/ML Insulin Pens with directions to inject subcutaneously 35 units daily with a start date of 02/01/2024."

The provider's Medication Destruction P&P revised on 09/23/2022 documented: "Medications shall be disposed of within 30 days of a practitioner's order to discontinue the medication, resident's discharge or death, or loss of integrity."

On 06/06/2024 at 1:32 PM, Surveyors conducted

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N 406	Continued From page 2 an exit conference and shared findings with Administrator A, Director of Clinical Operations (DCO) C, and Regional Director D. Surveyor asked when Resident 1 discharged from the facility. Administrator A stated Resident 1 discharged on 04/21/2024. Surveyor noted all medications are required to be sent with residents when discharging. Administrator A acknowledged an understanding of the concern and did not know why the provider retained Resident 1's medications after discharge.	N 406		