STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0011800	A. BUILDING: _____ B. WING _____	R-C 03/10/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANITAS GARDENS	117 E VAN BUREN PORT WASHINGTON, WI 53074

(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 03/10/2025, Surveyor conducted a verification visit at Anitas Gardens Port Washington. As a result of the survey two (2) of nine (9) deficiencies are repeat violations. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 17	{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 2 of 2 (Resident 2 and Resident 4) residents reviewed received all prescribed medications in the dosage and at intervals prescribed by a practitioner. This is a repeat deficiency. See statement of deficiency (SOD) 5N0Z11, dated 08/21/2024. Findings Include: On 03/10/2025, Surveyor conducted a verification visit. Surveyor requested Resident 2 and Resident 4's medication administration record (MAR) from Administrator A. Resident 2 admitted to the facility on 12/17/2022.	{N 352}		

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

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{N 352}	Continued From page 1 Resident 2 had current orders to include: Brimonidine Tartrate - Timolol 0.2-0.5% - Instill 1 Drop to Right Eye 2 times a Day Brinzolamide 1% - Instill 1 Drop in the Right Eye 3 Times a Day Latanoprost 0.005% - Instill 1 Drop in Both Eyes Systane Ultra 0.4-0.3% - Instill 1 Drop in Both Eyes 3 Times a Day Remedy Dimethicone 1.5% - Apply Topically to Affected Area on Buttocks 2 Times a Day Review of January MAR reflected the following medications were marked unavailable on: Brimonidine Tartrate: 8:00 AM - 01/01/2025, 01/02/2025, 01/03/2025, 01/04/2025, 01/05/2025, 01/06/2025, 01/22/2025 and 01/23/2025 8:00 PM - 01/01/2025, 01/02/2025, 01/03/2025, 01/04/2025, 01/05/2025, 01/06/2025, 01/21/2025, 01/22/2025 and 01/23/2025 Brinzolamide: 9:00 AM - 01/20/2025 8:00 PM - 01/19/2025 Latanoprost: 8:00 PM - 1/12/2025, 01/13/2025, 01/14/2025, 01/15/2025, 01/16/2025, 01/18/2025, 01/19/2025, 01/20/2025, 01/21/2025, 01/22/2025 and 01/23/2025 Systane Ultra: 8:00 AM - 01/06/2025 4:00 PM - 01/04/2025, 01/05/2025 and 01/06/2025 8:00 PM - 01/04/2025, 01/05/2025 and 01/06/2025 Review of February MAR reflected the following medications were marked unavailable on:	{N 352}		

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{N 352}	Continued From page 2 Brimonidine Tartrate: 8:00 AM - 02/09/2025 and 02/10/2025 8:00 PM - 02/08/2025, 02/09/2025 and 02/10/2025 Brinzolamide: 4:00 PM - 02/06/2025 Remedy Dimethicone: 8:00 AM - 02/18/2025 and 02/21/2025 Review of March MAR reflected the following medications were marked unavailable on: Latanoprost: 8:00 PM - 03/07/2025, 03/08/2025 and 03/09/2025 Resident 4 admitted to the facility on 04/04/2012. Resident 4 had current orders to include: Hydrocortisone 1% - Apply Topically to Affected Area 2 Times a Day Lorazepam 1 MG - Take a ½ Tablet (0.5mg) by Mouth 2 Times a Day Erythromycin 5 MG / Gram (0.5%) - Place a Small Ribbon into Right Eye Review of January MAR reflected: Hydrocortisone was documented medication unavailable at 8:00 AM: 01/05/2025 and 01/15/2025; 8:00 PM: 01/15/2025, 01/16/2025, 01/18/2025 and 01/20/2025. Lorazepam 1 MG was documented medication unavailable at 4:00 PM: 01/13/2025; 8:00 PM: 01/13/2025. Erythromycin 5 MG was documented medication unavailable at 8:00 PM: 01/01/2025, 01/02/2025, 01/04/2025, 01/05/2025, 01/06/2025, 01/07/2025, 01/08/2025, 01/10/2025, 01/11/2025, 01/12/2025, 01/13/2025 and 01/14/2025.	{N 352}		

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{N 352}	Continued From page 3 Review of February MAR reflected: Hydrocortisone was documented medication unavailable at 8:00 AM: 02/13/2025 and 02/17/2025. On 03/10/2025 at approximately 1:30 PM, Surveyor interviewed Administrator A and LPN C. Administrator A stated staff reorder medications when the medications/treatments are out. Administrator A stated staff are supposed to notify him/her or LPN C if medications do not arrive so s/he can follow up with the pharmacy. Administrator A stated if medications are reordered and there are no refills remaining, they do not get anything from the pharmacy letting them know the refills are gone and pharmacy does not notify the doctor for a new script. Administrator A and LPN C acknowledged they are working on systems to ensure residents receive all prescriptions timely. Administrator A stated s/he will work with staff to ensure s/he is notified of prescriptions that are out. The provider did not ensure residents reviewed received all prescribed medications in the dosage and at intervals prescribed by a practitioner.	{N 352}		
{N 389}	83.35(3)(d) Service plans updated annually or on changes Individual service plan review. Annually or when there is a change in a resident ' s needs, abilities or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment under sub. (1). All reviews of the individual service plan shall include input from the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or	{N 389}		

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{N 389}	Continued From page 4 resident ' s legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 residents' Individual Service Plans (ISP) were updated when there was a change of condition in the resident's physical and/or mental condition. Findings include: On 03/10/2025, Surveyor requested Resident 3 and Resident 5's ISP from Administrator A. Resident 3 moved into the facility, 05/05/2023, with diagnoses including lymphedema, osteoporosis, diabetes and weakness. Resident 3's ISP was signed 05/07/2024 with updates noted 11/07/2024. The ISP documented: "Mobility and Transferring: [Resident 3] remains ambulatory independently with the use of a rollator walker within the facility. [Resident 3's] last known documented fall was in Aug 2023. Resident does generally practice good safety concepts by using [his/her] walker however frequently has various bags hanging off the handles." Resident 5's ISP was signed 01/07/2025. The ISP documented: "Mobility and Transferring: [Resident 5] remains independent with ambulation and mobility with the use of a 4-wheel walker. Resident has had 5 noted falls over the past 12 months. All falls	{N 389}		

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{N 389}	Continued From page 5 occurred approximately the same time resident was found to have a urinary tract infection. [Resident 5] generally practices good safety habits by using [his/her] walker with all mobility and applying the breaks prior to standing or sitting [him/herself] down." On 03/10/2025, Surveyor interviewed LPN C. LPN C stated s/he was working on updating the ISP's. LPN C acknowledged s/he had not updated the ISP when Resident 3 and Resident 5 returned from the hospital. Resident 3 was hospitalized 01/17/2025 - 01/30/2025 and returned with new orders for occupational and physical therapy due to weakness. Resident 5 was hospitalized 02/22/2025 - 02/27/2025 and returned with new orders for occupational and physical therapy due to weakness. LPN C stated Resident 5's family wanted him/her sent out when s/he shows signs of a urinary tract infection, which was not identified on the ISP. LPN C acknowledged staff have to walk with Resident 3 and Resident 5 due to a change of condition resulting in Resident 3 and Resident 5 having weakness. LPN C acknowledged the ISP was not updated for Resident 3 when s/he returned from the hospital with new orders on 01/30/2025, and for Resident 5 when s/he returned from the hospital with new orders on 02/27/2025. LPN C stated s/he had the orders on his/her desk as s/he had been busy and stated s/he goes between a couple of facilities. LPN C stated the provider just hired a new RN and that hopefully the new RN will help LPN C get caught up. Administrator A stated s/he will help update ISPs to ensure they are updated timely. The provider did not ensure ISPs were updated when there was a change of condition in the resident's physical and/or mental condition.	{N 389}		

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