STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016878	A. BUILDING: _____ B. WING _____	R-C 03/12/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAKE COUNTRY LANDING	2255 N STONEHEDGE TRL SUMMIT, WI 53066

(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 From 03/08/2024 to 03/12/2024, Surveyor conducted a verification visit and standard survey at Lake Country Landing, a RCAC in Summit. Two deficiencies were identified. Both are repeat deficiencies - See Statement of Deficiency (SOD) TNU311, dated 03/26/2019, SOD DHJV11, dated 04/26/2022, SOD 5WJ111, dated 06/02/2022, 5WJ112, dated 11/28/2022, , and SOD 5WJ113, dated 06/14/2023. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 34	{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:	U 118		

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

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U 118	Continued From page 1	U 118		

Based on record review and interview, the provider did not ensure 2 of 3 tenants reviewed had health monitoring and medication management services adequate to meet their needs.

Tenant 4's physician was not notified when his/her blood sugar was greater than 400 on 02/11/2024 and 02/13/2024.

Tenant 8 was not administered his/her medications as prescribed.

This is a repeat deficiency - See Statement of Deficiency (SOD) TNU311, dated 03/26/2019, SOD 5WJ111, dated 06/02/2022, 5WJ112, dated 11/28/2022, and SOD 5WJ113, dated 06/14/2023.

Findings include:

On 03/08/2024 at approximately 1:00 p.m., Surveyor reviewed Tenant 4's record. Tenant 4 was admitted to the provider's complex on 03/01/2022 with diagnosis of diabetes. Tenant 4's physician orders included Humalog 100 unit/ml (Start Date: 11/09/2023 - End Date: 02/29/2024) - Inject per sliding scale: 0-149=0, 150-200=2, 201-250=4, 251-300=6, 301-350=8, 351-400=10 and >400=Call physician. Tenant 4's Medication Administration Record (MAR), dated 02/01/2024 to 02/29/2024, documented the following:

- 02/11/2024 5:00 p.m. Blood Sugar: 421
- 02/13/2024 12:00 p.m. Blood Sugar: 406

Surveyor was unable to locate documentation in Tenant 4's MAR or progress notes that indicated the physician was notified of Tenant 4's blood sugars greater than 400 on 02/11/2024 and

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U 118	Continued From page 2 02/13/2024. On 03/08/2024 at approximately 1:30 p.m., Surveyor reviewed concern with VP Success H, Nurse K and Administrator J that Tenant 4 had 2 occurrences from 02/01/2024 to 02/29/2024 when his/her blood sugar was greater than 400, but documentation did not indicate Tenant 4's physician was notified of the blood sugars. Administrator J stated s/he would follow up with Surveyor. On 03/12/2024 at approximately 3:00 p.m., Administrator J emailed Surveyor and stated, "With the onboarding of our new nurse, we are reviewing insulin orders for all diabetics and collaborating with primary providers to better triage hyperglycemic episodes outside of routine business hours. Staff education for proper clinical triage is already underway." The email included an attachment of a letter sent to Tenant 4's physician, dated 03/12/2024, requesting standing orders for caregivers to update the complex's nurse for hyperglycemic episodes after hours. The documentation did not indicate Tenant 4's physician was updated of Tenant 4's blood sugars on 02/11/2024 and 02/13/2024. Example 2 - Medication Administration On 03/08/2024 at approximately 10:00 a.m., Surveyor interviewed Caregiver L, who was responsible for medication administration that day. Caregiver L stated s/he often had to "hound" pharmacy to get tenant medications delivered because the pharmacy was used to servicing skilled nursing facilities that had medications in stock, rather than a resident care apartment complex, which did not have a back-up supply of medications.	U 118		

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U 118	Continued From page 3 On 03/08/2024 at approximately 1:00 p.m., Surveyor reviewed Tenant 8's record. Tenant 8 was admitted to the provider's complex on 02/15/2024. Tenant 8's record documented the complex's staff began administrating Tenant 8's medications on 02/21/2024. Tenant 8's MAR and progress notes, dated 02/21/2024 to 03/08/2024, documented the following: - Alendronate Sodium 70 mg (Start Date: 02/19/2024) - Take 1 tablet every Monday for osteoarthritis: Not administered on 02/26/2024 - "Not in." - Omeprazole 20 mg (Start Date: 02/17/2024) - Take 1 tablet daily for GERD: Not administered 02/26/2024 - "Not in cart." - Quetiapine Fumarate 100 mg (Start Date: 02/16/2024) - Take 1.5 tablets daily for behaviors: Not administered 02/23/2024, 03/03/2024 and 03/06/2024 - "Do not have." On 03/08/2024 at approximately 1:30 p.m., Surveyor reviewed concern with VP Success H, Nurse K and Administrator J that Tenant 8 missed medications due to supply concerns. VP Success H acknowledged the provider had difficulties obtaining medications from their pharmacy and stated they were trying to work through it.	U 118		
U 189	89.28(1) Risk Agreement (1) REQUIREMENT As a protection for both the individual tenant and the residential care apartment complex, a residential care apartment complex shall enter into a signed, jointly negotiated risk agreement with each tenant	U 189		

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U 189	Continued From page 4	U 189		

by the date of occupancy.

This Rule is not met as evidenced by:
Based on record review and interview, the provider did not ensure 1 of 3 tenants reviewed had entered into a signed, jointly negotiated risk agreement as a protection for both the individual tenant and the provider. Tenant 4 did not have a risk agreements related to non-compliance of his/her heart failure management.

This is a repeat deficiency. See Statement of Deficiency (SOD) DHJV11, dated 04/26/2022.

Findings include:

On 03/08/2024 at approximately 1:00 p.m., Surveyor reviewed Tenant 4's record. Tenant 4 was admitted to the provider's complex on 03/01/2022 with congestive heart failure. Tenant 4's physician orders included:

- Furosemide 40 mg (Start Date: 08/30/2023) - Take 1 tablet 2 times daily for diuretic.
- Check weight daily (Start Date: 06/06/2023)

Tenant 4's medication administration record (MAR), dated 02/01/2024 to 02/29/2024, documented 21 refusals of his/her Furosemide. The MAR documented 1 weight taken during the month and 22 refusals of his/her weight being monitored.

On 03/08/2024 at approximately 1:30 p.m., Surveyor reviewed concern with VP Success H, Nurse K and Administrator J that Tenant 4 had documented refusals of Furosemide and only 1 daily weight documented for the month of February. Administrator J acknowledged Furosemide refusals and stated Tenant 4 had a

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U 189	Continued From page 5 history of also refusing daily weights. Surveyor shared concern that Tenant 4 had non-compliance with his/her heart failure management, but a risk agreement was not on file in relation to the non-compliance. VP Success H and Administrator J agreed that a risk agreement related to non-compliance of Tenant 4's heart failure management should have been completed.	U 189		