STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018327	A. BUILDING: _____ B. WING _____	R-C 12/13/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RIVERS-WISCONSIN (THE)	621 LATTON LANE PORTAGE, WI 53901

(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 12/13/2023, Surveyors conducted a verification visit at The-Rivers Wisconsin. Three deficiencies were identified. Three of 3 deficiencies were repeat violations. See Statement of Deficiencies (SOD) 744X12, dated 08/08/2023 and SOD 2K0811 dated 12/16/2022. Five violations from previous statement of deficiency (SOD) 744X12, dated 08/08/2023 were corrected. Under statutory provisions of Wis. Stat. Ch50, $200 revisit fee is being assessed. Census: 12	{N 000}		
N 165	83.12(4)(c) Reporting incidents with serious injury A CBRF shall send a written report to the department within 3 working days after any of the following occurs: Any incident or accident resulting in serious injury requiring hospital admission or emergency room treatment of a resident. This Rule is not met as evidenced by: Based on record review and interview, the provider did not report a serious injury resulting in emergency room treatment to the Department within 3 days. Resident 6 sustained a fall on 11/17/2023 which resulted in him/her receiving staples. This is a repeat deficiency. See statement of	N 165		

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

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N 165	Continued From page 1 deficiency (SOD) 744X11, dated 03/24/2023. Findings include: On 12/13/2023, Surveyor reviewed Resident 6's record and identified the following: Resident 6 was admitted on 05/05/2018 with diagnoses including hemiplegia affecting right dominant side and history of falling. Resident 6 is their own legal decision maker. Resident 6's incident report dated 11/17/2023 documented: "Resident was trying to move from [his/her] bed to [his/her] chair and fall to the floor on the side of [his/her] chair and hit [his/her] head on the corner of [his/her] dresser next to [his/her] bed. Transferred to hospital or ER-Yes. Did resident sustain any injuries? Yes, notes: resident hit [his/her] head and pointed to [his/her] eye it was swollen. Injury type information-cut (laceration)-top of head, swelling (edema)-left eye." Resident 6's progress notes dated 11/18/2023 documented: "Resident is back from the er for [his/her] fall. Resident was diagnoses was. Fall head injury, laceration of scalp there were imaging tests done CT cervical spine with contrast and a ct head without contrast. Appointment needs to be set up on Mon Nov 20th, there were no medication changes." Resident 6's hospital discharge summary dated 11/17/2023 documented: "Reason for visit-Fall Diagnoses-fall, head injury, laceration of scalp Instructions-2 staples need to be removed in 5	N 165		

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N 165	Continued From page 2 days." On 12/13/2023, Surveyor reviewed Department records, which indicated no self-reports were submitted regarding Resident 6's laceration and staples. On 12/13/2023 at 12:15 PM, Surveyor interviewed Administrator G. Administrator G confirmed s/he did not report Resident 6's injury to the Department. Administrator G stated s/he thought only police contact was a reportable incident. Administrator G s/he will review DHS 83.12 for all reporting requirements, so the provider can be in compliance in the future.	N 165		
{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 residents received all prescribed medications in the dosage and intervals prescribed by the physician. Resident 5 did not receive medications for the months of November 2023 as prescribed. Resident 6 did not receive his/her pain medications as prescribed.	{N 352}		

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{N 352}	Continued From page 3 This is a repeat violation from previous Statement of Deficiency (SOD) # ZK0811, dated 12/16/2022 and SOD# ZK0812 dated 08/08/2023. Findings include: This facility provide care to the following client groups: irreversible dementia, Alzheimer's, advanced aged, terminally ill, physically disabled, emotionally disturbed and the mentally ill. Example 1: Resident 5 On 12/13/2023, Surveyor reviewed Resident 5's medical record. Resident 5 was admitted 01/03/2022 with diagnoses that include but are not limited to: morbid obesity, depression, seasonal affective disorder, primary open angle glaucoma of both eyes, dry eye syndrome of both eyes, environmental allergies, ocular hypertension bilateral. On 12/13/2023 at 10:00 AM, Surveyor reviewed Resident 5's Medical Administration Record (MAR) for November 2023. According to Resident 5's MAR, Resident 5 was to be administered Dorzoiamide HCL 2% eye drops 2 times daily and Fluticasone 50 microgram nostril spray 2 times daily. Resident 5's MAR indicated Resident 5 did not receive Dorzoiamide HCL or Fluticasone for the following dates: Dorzoiamide HCL 11/01/2023 AM and PM doses 11/02/2023 AM and PM doses 11/03/2023 AM and PM doses 11/04/2023 AM and PM doses	{N 352}		

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{N 352}	Continued From page 4 11/05/2023 AM dose 11/06/2023 AM and PM doses 11/07/2023 AM and PM doses 11/08/2023 AM and PM doses 11/09/2023 AM and PM doses 11/10/2023 AM and PM doses 11/11/2023 AM and PM doses 11/12/2023 AM and PM doses 11/13/2023 AM and PM doses Fluticasone 11/01/2023 AM and PM doses 11/02/2023 AM and PM doses 11/03/2023 AM and PM doses 11/04/2023 AM and PM doses 11/05/2023 AM dose 11/06/2023 AM and PM doses 11/07/2023 AM and PM doses 11/08/2023 AM and PM doses 11/09/2023 AM and PM doses 11/10/2023 AM and PM doses 11/11/2023 AM and PM doses 11/12/2023 AM and PM doses 11/13/2023 AM and PM doses On 12/13/2023 at 12:00 PM, Surveyor interviewed Resident Care Coordinator K (RCC-K). RCC-K stated that Resident 5's MAR for November 2023 indicated that, "We were waiting on delivery from the pharmacy for both medicines in question." Surveyor asked if that meant that Dorzoiamide HCL and Fluticasone for Resident 5 was not in the building so it was not able to be administered. RCC-K responded, "Yes, that is correct." Example 2: Resident 6 On 12/13/2023, Surveyor reviewed Resident 6's	{N 352}		

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{N 352}	Continued From page 5	{N 352}		

medical record. Resident 6 was admitted on 05/05/2018 with diagnoses including hemiplegia affecting right dominant side, chronic pain syndrome, and pain in right leg.

On 12/13/2023 at 9:50 AM, Surveyor interviewed Caregiver J. Caregiver J stated Resident 6 was out of his/her Oxycodone, which s/he takes 3x/day. Caregiver J stated s/he gave Resident 6 his/her last dose on 12/11/2023. Caregiver J stated the provider was waiting for a delivery from the pharmacy. Caregiver J stated last week s/he pushed the reorder button in their electronic charting system to inform management Resident 6 was going to be out of his/her Oxycodone in the coming days. Caregiver J stated s/he told RCC-K on 12/11/2023, the house still had not received a delivery from the pharmacy. Caregiver J indicated "WDP" documented in the MAR meant waiting on delivery from pharmacy.

A review of Resident 6's December 2023 MAR documented the following:
Oxycodone tab 10MG-Take 1 tablet by mouth 3 times daily for pain-8am, 12pm, and 8pm.
December 11th: 8am-"WDP"
December 12th: 8am-"WDP", 12pm-"WDP, 8pm-"WDP"
December 13th: 8AM-"WDP"

On 12/13/2023 at 10:59 AM, Surveyor interviewed RCC-K. RCC-K stated s/he is in charge on pushing all medication refill requests through to the pharmacy after requested by staff. RCC-K stated s/he was notified on 12/09/2023 that Resident 6 was getting low of his/her Oxycodone, so s/he sent a refill request to the pharmacy. RCC-K stated s/he received a fax from the pharmacy indicating Resident 6 had no refills left, so the pharmacy contacted the

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{N 352}	Continued From page 6 prescriber and was waiting for a new order. Surveyor asked RCC-K if s/he had followed up with pharmacy after being notified on 12/11/2023 that Resident 6 was almost out. RCC-K stated "no", and s/he was waiting for the pharmacy. Surveyor noted additional follow up should have been completed to ensure Resident 6 received all medication as prescribed and documented in the record. RCC-K acknowledged s/he should have followed up with Resident 6's physician to see the status of Resident 6's medication.	{N 352}		
{N 427}	83.38(1)(c) Leisure time activities. As appropriate, the CBRF shall teach residents the necessary skills to achieve and maintain the resident ' s highest level of functioning. In addition to the assessed needs as determined under s. DHS 83.35(1), the CBRF shall provide or arrange services adequate to meet the needs of the residents in all of the following areas: Leisure time activities. The CBRF shall provide a daily activity program to meet the interests and capabilities of the residents. Employees shall encourage and promote resident participation in the activity program. The CBRF shall develop and post the activity schedule in an area available to residents. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure leisure activities appropriate to resident needs. There was no activities observed on day of survey. This is a repeat violation from previous statement of deficiency (SOD) 744X11 dated 03/24/2023	{N 427}		

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{N 427}	Continued From page 7 and SOD 744X12 dated 08/08/2023. Findings include: On 12/13/2023 at 8:30 AM, Surveyor observed the physical environment. There was a documented calendar for leisure activities for residents. Schedule indicated that leisure activities would take place at 10:00 AM, 12:00 PM On 12/13/2023 at 10:00 AM, No resident activities were observed. On 12/13/2023 at 10:45 AM, Surveyor interviewed Caregiver J. Caregiver J stated, "I have been here a few months, we try to do activities, but don't have time, most them just go outside. We have a calendar, and try to do activities." Surveyor asked if there were any structured resident activities. Caregiver J stated, "No not really, we have stuff for them to do if they want, but we don't get together and play bingo or anything." On 12/13/2023/2023 at 11:15 AM, Surveyor interviewed Resident 5. Resident 5 stated, "They don't offer activities unless you can go outside. There are things to do, but you have to find them yourself." On 12/13/2023 at 12:00 PM, no resident activities were observed. On 12/13/2023 at 12:15 PM, Surveyor discussed the above concern with Administrator G. Administrator G stated that leisure time activities were one of the many things that were being worked on. Administrator G stated that although sometimes difficult, leisure activities need to be scheduled and offered to residents.	{N 427}		

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