STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018219	A. BUILDING: _____ B. WING _____	C 06/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEW PERSPECTIVE WAUKESHA	**1701 EAST BROADWAY WAUKESHA, WI 53186**

(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 05/28/2024 to 06/04/2024, Surveyor conducted a complaint investigation at New Perspective Waukesha, a RCAC in Waukesha. One deficiency was identified. The complaint was substantiated. Census: 42	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: Based on record review and interview, the provider did not ensure medication administration and management was provided. The provider did not administer Tenant 1's insulin as prescribed, did not maintain accurate documentation of his/her blood sugar (BS) readings and did not	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		

document number of insulin units administered.

Findings include:

From 05/28/2024 to 06/04/2024, Surveyor conducted a complaint investigation alleging the provider did not properly manage a tenant's diabetes.

On 05/28/2024 at approximately 1:00 p.m., Surveyor reviewed Tenant 1's record. Tenant 1 was admitted to the provider's complex on 06/16/2021 with a diagnosis of diabetes.

Example 1 - Incorrect Insulin Doses:

Tenant 1's physician orders included Humalog 100 unit/ml - Inject per sliding scale daily with meals BS<300=8 units, 301-350=10 units, 351-400=12 units, 400=14 units (Start Date: 03/29/2024). The medication administration record (MAR), dated 04/01/2024 to 05/28/2024, identified the following dates when Tenant 1 did not receive his/her Humalog 100 unit/ml as prescribed:

- 04/16/2024 AM: BS 89 - No insulin given *Should have received 8 units.
- 04/29/2024 AM: BS 90 - No insulin given *Should have received 8 units.
- 05/07/2024 PM: BS 83 - No insulin given *Should have received 8 units.
- 05/12/2024 AM: BS 81 - No insulin given *Should have received 8 units.
- 05/14/2024 AM: BS 85 - No insulin given. *Should have received 8 units.
- 05/19/2024 AM: BS 219 - 24 units given. *Should have received 8 units. After reviewing with Director of Nursing A (DON A), it is believed the caregiver entered the amount of Lantus

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U 118	Continued From page 2 Tenant 1 received that morning and did not administer Humalog. - 05/22/2024 PM: BS 57 - No insulin given *Should have received 8 units. - 05/23/2024 AM: BS 93 - No insulin given. *Should have received 8 units. - 05/26/2024 PM: BS 54 - No insulin given *Should have received 8 units. - 05/27/2024 AM: BS 98 - No insulin given. *Should have received 8 units. On 05/28/2024 at approximately 2:00 p.m., Surveyor interviewed Director of Nursing A regarding Tenant 1's diabetic management. Surveyor reviewed occurrences when Tenant 1 did not receive insulin as prescribed. Director of Nursing A made note of Surveyor's concern. Director of Nursing A confirmed all caregivers that administered insulin were delegated by Director of Nursing A and stated, "They're messing with my license." Example 2 - Incorrect Documentation of Blood Sugar: Surveyor reviewed Tenant 1's MAR, dated 04/01/2023 to 07/01/2023 and Tenant 1's LibreView readings (obtained by Surveyor), dated 04/04/2023 to 05/01/2023, 05/05/2023 to 06/01/2023 and 06/05/23 to 06/18/2023. Surveyor identified the following discrepancies: - 04/04/2023: LibreView BS Reading = 74, BS of 174 documented in record. - 04/08/2023: LibreView BS Reading = 65, BS of 164 documented in record. - 04/09/2023: LibreView BS Reading = 98, BS of 198 documented in record. - 04/10/2023: LibreView BS Reading = 79, BS of 179 documented in record.	U 118		

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U 118	Continued From page 3 - 04/11/2023: LibreView BS Reading = 60, BS of 160 documented in record. - 04/14/2023: LibreView BS Reading = 70, BS of 170 documented in record. - 04/17/2023: LibreView BS Reading = 88, BS of 188 documented in record. - 04/22/2023: LibreView BS Reading = 82, BS of 182 documented in record. - 05/08/2023: LibreView BS Reading = 74, BS of 174 documented in record. - 05/09/2023: LibreView BS Reading = 93, BS of 193 documented in record. - 05/12/2023: LibreView BS Reading = 87, BS of 187 documented in record. - 05/15/2023: LibreView BS Reading = 77, BS of 177 documented in record. - 05/16/2023: LibreView BS Reading = 61, BS of 161 documented in record. - 05/21/2023: LibreView BS Reading = 72, BS of 172 documented in record. - 05/21/2023: LibreView BS Reading = 59, BS of 159 documented in record. - 06/05/2023: LibreView BS Reading = 81, BS of 181 documented in record. - 06/06/2023: LibreView BS Reading = 71, BS of 171 documented in record. - 06/12/2023: LibreView BS Reading = 58, BS of 158 documented in record. - 06/13/2023: LibreView BS Reading = 57, BS of 151 documented in record. *Surveyor was able to correlate BS readings by date and time recorded on LibreView log with date and time documented in Tenant 1's MAR. On 05/28/2024 at approximately 2:00 p.m., Surveyor interviewed Director of Nursing A regarding Tenant 1's blood sugar readings and documentation. Director of Nursing A stated it was identified in the past that a caregiver was falsely documenting Tenant 1's blood sugar	U 118		

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U 118	Continued From page 4	U 118		

readings. Director of Nursing A explained that Tenant 1's documented blood sugar readings may not always mirror the LibreView readings since caregivers manually check blood sugars at times, but that it had been identified that a caregiver was added ~100 to Tenant 1's blood sugar readings when the reading was low. Director of Nursing A stated the caregiver did not give a reason for adding 100, but Director of Nursing A stated s/he presumed it was to avoid having to recheck the blood sugar. Director of Nursing A stated s/he had met with Tenant 1's family to discuss the concern and re-educated the caregiver.

Example 3 - Lack of Documentation:

Surveyor reviewed Tenant 1's MAR, dated 03/01/2024 to 05/28/2024 and identified the following concerns:

- 03/01/2024 - 03/31/2024: The number of insulin units administered was not documented.
- 04/01/2024 - 04/05/2024 and 04/11/2024: AM blood sugars and insulin administration was not documented.
- 04/01/2024 - 04/06/2024, 04/16/2024, 04/19/2024 and 04/26/2024: PM blood sugars and insulin administration were not documented.
- 05/23/2024: PM blood sugar was not documented.

On 05/30/2024 at approximately 11:00 a.m., Surveyor reviewed the above concerns with Director of Nursing A.

On 06/04/2024 at approximately 10:15 a.m., Director of Nursing A stated s/he audited charts and had caregivers begin documenting number of units administered on 04/01/2024. Director of

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U 118	Continued From page 5 Nursing A stated s/he reviewed Tenant 1's record and was not sure why caregivers did not document the insulin given at the beginning of April or late May.	U 118		