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 _____	R-C 10/10/2024

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 On 10/08/2024, Surveyors conducted a verification visit, a complaint vistit and a standard survey at New Perspecitve Waukesha, a RCAC in Waukesha. Five deficiencies were identified. There is one repeat deficiency. See Statement of Deficiency (SOD) 90DR11, dated 06/04/2024 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 health monitoring,	{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}		

medication administration and medication management was provided for 3 of 4 tenants reviewed. Tenant 2's medications were not administered as prescribed, and his/her blood sugar was not recorded on a date his/her insulin was held. Tenant 3's Methylphenidate was not always available for administration. Tenant 1's diabetic management orders were not followed.

This is a repeat deficiency. See Statement of Deficiency (SOD) 90DR11, dated 06/04/2024.

Findings include:

On 10/08/2024, Surveyors conducted a complaint investigation alleging the provider mismanaged tenant medications.

On 10/08/2024 at approximately 10:30 a.m., Surveyors reviewed tenant records and identified the following concerns related to health monitoring, medication administration and medication management:

Exampe 1 - Tenant 2:

Tenant 2 was admitted to the provider's complex on 05/02/2022. Tenant 2's service agreement, dated 08/04/2023, indicated the provider managed Tenant 2's medications. Tenant 2's medication administration record (MAR), dated 09/01/2024 to 10/07/2024, documented the following:

- Medication Availability: Tenant 2 did not receive his/her morning medications as prescribed on 10/02/2024. Missed medications included Amiodarone 200 mg, Basaglar 100 unit/ml 20 units, Carvedilol 6.25 mg, Dialyvite tablet, Eliquis 2.5 mg, Ferrous Gluc tablet, Florajen capsule,

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{U 118}	Continued From page 2	{U 118}		

Healthy Eyes Lutein/Zeaxa, Hydroxyzine 10 mg, Novolog insulin, Isosorb Mono 30 mg, Januvia 50 mg, Nifedipine 30 mg, Pantoprazole 40 mg and Rosuvastatin 10 mg.
- Blood Sugar (BS) Recordings: Tenant 2's physician orders included Novolog (Start Date: 06/06/2024) - Inject 3 times daily before meals <100=0 units, 101-150=2 units, 151-200=4 units, 201-250=6 units, 251-400=8 units, >400=9 units and give a glass of water. Recheck in 4 hours, if >300 call provider. On 09/24/2024, Tenant 2's Novolog administration was held during lunch meal, but his/her blood sugar reading was not recorded.
- Insulin Administration: On 09/28/2024, Tenant 2's Medication Administration Record (MAR) did not document s/he received his/her Novolog as prescribed prior to breakfast. Novolog administration was left blank, yet all other morning medications were documented as administered.

On 10/08/2024 at approximately 3:00 p.m., Surveyors reviewed Tenant 2's medication availability and diabetic management concerns with Administrator B and Clinical Educator C. Clinical Educator C was unsure why Tenant 2's medications would have been unavailable and made note of the diabetic management concerns.

Example 2 - Tenant 3:

Tenant 3 was admitted to the provider's complex on 02/23/2024. Tenant 3's service agreement, dated 02/24/2024, indicated the provider managed his/her medications. Tenant 3's physician orders included Methylphenidate 10 mg in the AM and Methylphenidate 20 mg in the PM (Start Date: 02/28/2024). Tenant 3's MAR, dated 03/01/2024 to 03/31/2024, documented his/her

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{U 118}	Continued From page 3 Methylphenidate was unavailable for administration on 03/10/2024 AM, 03/12/2024 AM, 03/13/2024 AM, 03/22/2024 AM and PM and 03/23/2024. On 10/08/2024 at approximately 3:00 p.m., Surveyors interviewed Administrator B and Clinical Educator C. Surveyors shared concern that Tenant 3's Methylphenidate was unavailable for administration 6 times from 03/01/2024 to 03/31/2024. Clinical Educator C reviewed Tenant 3's MAR and confirmed Surveyors' concern. Clinical Educator C stated the medication was likely available, but the caregiver didn't look for the medication in the narcotic box. Example 3 - Tenant 1: Tenant 1 was admitted to the provider's complex on 06/16/2021 with diagnosis of diabetes. Tenant 1's physician orders included an order for a bedtime snack of half a sandwich or crackers and peanut butter with a glass of milk to prevent low blood sugars (Start Date: 02/07/2023) and Humalog 100 unit/ml - Inject per sliding scale daily in AM 151-200=2 units, 201-250=4 units, 251-300=6 units, 301-350=10 units, 351-400=12 units, 401+=14 units and update physician (Start Date: 09/07/2024 - End date: 09/30/2024). Tenant 1's record documented the following: - 09/20/2024 AM Blood Sugar 505 - No documentation of MD being updated. - Tenant 1's bedtime snack was held on 09/20/2024, 09/23/2024, 10/01/2024, 10/06/2024 and 10/07/2024. Documentation indicated Tenant 1's blood sugar was "outside of parameters." On 10/08/2024 at approximately 3:00 p.m., Surveyors reviewed concern with Administrator B	{U 118}		

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{U 118}	Continued From page 4 and Clinical Educator C that Tenant 1's physician was not updated of a blood sugar greater than 400 and Tenant 1 did not always receive his/her bedtime snack to prevent low blood sugars. Clinical Educator C confirmed the provider's Triage RN was updated regarding blood sugar concerns, but s/he was unable to confirm if the physician was updated. Clinical Educator C confirmed Tenant 1 did not have parameters to hold his/her bedtime snack indicating s/he should always have received a bedtime snack.	{U 118}		
U 127	89.23(3)(f) SERVICES SERVICE QUALITY. Meals and snacks served to tenants shall be prepared, stored and served in a safe and sanitary manner. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure meals were served in a safe and sanitary manner. Cold foods were served at temperatures greater than 40°F. Findings include: From 10/08/2024 to 10/10/2024, Surveyors conducted a complaint investigation alleging the provider's meals were not palatable. On 10/08/2024 at approximately 10:30 a.m., Surveyor requested a lunch meal be served to Surveyors at the time residents were served. On 10/08/2024 at approximately 11:30 a.m.,	U 127		

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U 127	Continued From page 5 Surveyors were served a chicken salad sandwich, carrots with ranch dressing, soup and a cup of mixed fruit (grapes, raspberries and pineapples). The following concerns were identified regarding food temperatures: - Chicken salad, served "cold," had a temperature of 72.3°F. - Ranch dressing had a temperature of 70.3°F. - Fruit had a temperature of 59.1°F. "Leaving food out too long at room temperature can cause bacteria (such as Staphylococcus aureus, Salmonella Enteritidis, Escherichia coli O157:H7, and Campylobacter) to grow to dangerous levels that can cause illness. Bacteria grow most rapidly in the range of temperatures between 40 °F and 140 °F, doubling in number in as little as 20 minutes ... Keep hot food hot-at or above 140 °F. Place cooked food in chafing dishes, preheated steam tables, warming trays, and/or slow cookers. Keep cold food cold-at or below 40 °F. Place food in containers on ice." (Source: USDA Food Safety and Inspection Service, "Danger Zone" 40?F -140?F, June 28, 2017, ttps://www.fsis.usda.gov/food-safety/safe-food-handling-and-preparation/food-safety-basics/danger-zone-40f-140f#mm-0 (retrieval date - October 10, 2024).) On 10/08/2024 at approximately 3:00 p.m., Surveyors discussed concern with Administrator B and Clinical Educator C that cold foods were served warmer than 40°F. Administrator B took note of Surveyors' concern and stated the kitchen had made a lot of improvements lately.	U 127		

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U 188	Continued From page 6	U 188		
U 188	89.27(4) SERVICE AGREEMENT REVIEW AND UPDATE. The service agreement shall be reviewed when there is a change in the comprehensive assessment or at the request of the facility or at the request or on behalf of the tenant and shall be updated as mutually agreed to by all parties to the agreement. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 4 service agreements reviewed was updated when there was a change in the tenant's comprehensive assessment. Tenant 3's service agreement was not updated when his/her comprehensive assessment changed due to a change in condition. Findings include: On 10/08/2024 at approximately 10:30 a.m., Surveyors reviewed Tenant 3's record. Tenant 3 was admitted to the provider's complex on 02/23/2024. Tenant 3's record included an updated comprehensive assessment, dated 07/02/2024, that indicated s/he needed assistance with his/her Cpap, set-up with dressing and was at a risk of falls. Tenant 2's service agreement was dated 02/24/2024 and had not been updated regarding his/her change in services. On 10/08/2024 at approximately 3:00 p.m., Surveyors reviewed concern with Administrator B and Clinical Educator C that Tenant 3's service agreement was not updated with his/her change in condition and change in his/her comprehensive assessment. Clinical Educator C stated s/he would further review Tenant 3's record and	U 188		

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U 188	Continued From page 7 provide Surveyor with an updated service agreement if s/he was able to locate one. On 10/10/2024 at approximately 10:15 a.m., Surveyor updated Administrator B that s/he had not received an updated service agreement for Tenant 3. Administrator B stated s/he would follow up. On 10/10/2024 at approximately 12:30 p.m., Surveyor received Tenant 3's service agreement, dated 02/24/2024, but did not receive a service agreement updated after Tenant 3's comprehensive assessment, dated 07/02/2024.	U 188		
U 211	89.28(6) RISK AGREEMENT UPDATING. The risk agreement shall be updated when the tenant's condition or service needs change in a way that may affect risk, as indicated by a review and update of the comprehensive assessment, by a change in the service agreement or at the request of the tenant or facility. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 4 of 4 tenants reviewed had an updated risk agreement when their condition or service needs changed in a way that affected risk. Tenant 1, Tenant 4, Tenant 2, and Tenant 3 did not have updated risk agreements. Findings include: On 10/08/2024 at approximately 10:00 a.m., Surveyors reviewed tenant records. The following concerns regarding risk agreements were	U 211		

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U 211	Continued From page 8	U 211		

identified:

Example 1 - Tenant 1:

Tenant 1 was admitted to the provider's complex on 06/16/2021. Tenant 1's comprehensive assessment, dated 08/27/2024, indicated s/he had a history of falls and diabetes. Tenant 1's service agreement, dated 08/30/2024, indicated s/he was diabetic and very forgetful, requiring reminders to go to meals and follow up to ensure meals were ate. The service agreement documented Tenant 1 had a history of a femur fracture and was at risk for further falls. Tenant 1's progress notes, dated 06/07/2024 to 10/08/2024, indicated s/he sustained a fall on 07/21/2024 and 08/10/2024. The progress notes documented the provider's Triage RN was contacted regarding concerns with Tenant 1's blood sugar on 06/08/2024, 06/13/2024, 06/16/2024, 06/17/2024, 06/18/2024, 06/22/2024, 07/05/2024, 07/11/2024, 07/12/2024, 07/22/2024, 09/14/2024, 09/23/2024, 09/28/2024, 09/29/2024 10/01/2024 and 10/04/2024. Tenant 1's record did not include a risk agreement related to falls or diabetic management.

Example 2 - Tenant 4:

Tenant 4 was admitted to the provider's complex on 02/23/2024. Tenant 4's comprehensive assessment, dated 02/16/2024, and service agreement, dated 02/24/2024, indicated Tenant 4 had a history of falls. Tenant 4's comprehensive assessment, updated 07/01/2024 due to a change in condition, indicated Tenant 4 continued to have falls and exhibited behaviors of inappropriate elimination, uncooperative with cares, wandering/exit seeking and refusals. Tenant 4's progress notes, dated 02/23/2024 to

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07/31/2024, documented s/he sustained falls on 03/11/2024, 03/29/2024 and 04/03/2024. Tenant 4's record documented s/he was found wandering on 06/19/2024 and 07/01/2024. Tenant 4's record did not include a risk agreement regarding falls or behaviors.

Example 3 - Tenant 2:

Tenant 2 was admitted to the provider's complex on 05/02/2022. Tenant 2's comprehensive agreement, dated 03/13/2024, and service agreement, dated 08/04/2023, indicated s/he was at risk of falls and had a history of falls. Tenant 2's progress notes, dated 06/01/2024 to 10/08/2024 indicated s/he had sustained falls on 06/11/2024, 06/23/2024 and 08/20/2024. Tenant 2's record did not include a risk agreement regarding falls.

Example 4 - Tenant 3:

Tenant 3 was admitted to the provider's complex on 02/23/2024. Tenant 3's comprehensive assessment, dated 07/02/2024, and service agreement, dated 02/24/2024, indicated s/he had a history of falls. Tenant 3's progress notes, dated 02/23/2024 to 07/31/2024, indicated s/he sustained falls on 05/23/2024, 05/29/2024, 06/15/2024, 06/30/2024 and 07/11/2024. Tenant 3's record did not include a risk agreement regarding falls.

On 10/08/2024 at approximately 3:00 p.m., Surveyors' reviewed concern with Administrator B and Clinical Educator C that 4 of 4 tenants reviewed did not have risk agreements for risks identified in their comprehensive assessments. Surveyor shared observation that all tenants had risk agreements regarding the risk of a change in condition resulting from not reporting unmet

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U 211	Continued From page 10 needs to the provider; however, tenants did not have individualized risk agreements related to risks identified in their comprehensive assessments. Clinical Educator C agreed with Surveyors' concern and stated some tenants had individualized risk agreements, but that several tenants needed updated risk agreements.	U 211		
U 272	89.35(3) GRIEVANCES Written Summary. (3) The residential care apartment complex shall provide a written summary of the grievance, findings, conclusions and any action taken as a result of the grievance to the tenant, the tenant's designated representative, if any, and, for tenants whose services are funded under s. 46.277, Stats., the county department or aging unit designated to administer the medical assistance waiver. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure a written summary, findings, conclusions and any action taken as a result of grievances was completed for each grievance filed. The provider did not follow up on grievances filed the week of 07/22/2024. Findings include: From 10/08/2024 to 10/10/2024, Surveyors conducted a complaint investigation alleging the provider did not follow the grievance procedure. On 10/08/2024 at approximately 10:00 a.m.,	U 272		

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U 272	Continued From page 11 Surveyor reviewed the following grievances that were reportedly turned in by Tenant 3 and Tenant 4's family member the week of 07/22/2024: - March 2024: Tenant 4 was administered multiple tablets of his/her medication rather than the provider increasing the dosage/tablet to allow for less tablets. - March 2024: Tenant 3 was administered his/her medications, but not observed taking the medications. *Document stated the provider was unable to investigate due to no date of the incident given. - March 2024: Concierge was not answering always answering the phone. - March 2024: Tenant 3 did not receive PRN Imitrex for a headache because a caregiver able to administer medications was unavailable. *Document stated Imitrex was not ordered. - March 2024: Tenant 3 did not have any medication available for a headache. *Document indicated Acetaminophen was available. - 03/01/2024 and 03/05/2024: A visitor was left in an office unsupervised with medications. *Documentation indicated employee involved had been terminated. - 03/30/3034: Tenant 3 did not receive his/her Fluoxetine 60 mg for several days due to the provider "running out." *Documentation indicated this was investigated and medication error procedure was followed. - April/July 2024: Resident charts included incorrect information. *Documentation indicated the provider was unable to investigate due to lack of details. - 04/12/2024: Tenant 3 received PRN Clonidine 2 times for hypertension/high blood pressure, but the medication was prescribed for Morphine withdrawal. *Documentation indicated anti-hypertensive was an appropriate use of the	U 272		

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U 272	Continued From page 12 PRN. - May 2024: No bathing services were offered during the week Tenant 3 and Tenant 4 were displaced. - 05/27/2024: Tenant 3 and Tenant 4's unit had feces on carpet, bathroom floor and bedding, as well as a clogged toilet. The mess was left through the weekend. - 05/28/2024 through 07/06/2024: PRN medications were automatically refilled each month even if not used. - May/July 2024: Tenant 3 was administered his/her evening and bedtime medications together. - 06/01/2024: Caregiver threatened Tenant 3 that caregivers were complaining about him/her and Tenant 3 would be written up. - 06/01/2024: Caregiver "barked" orders from the doorway of Tenant 3 and Tenant 4's apartment to get ready rather than providing assistance. - 06/12/2024: Tenant 4 pushed the call button twice at 5:15 a.m. and did not receive assistance until approximately 8:15 a.m. - 06/23/2024: Dinner was served cold and menu was not followed. - 06/23/2024: Tenant 4's call light was not responded to for approximately 80 minutes. - 06/30/2024: Tenant 3 called for assistance during the night and the caregiver did not identify concerns for hypoglycemia. - 06/30/2024: Despite numerous complaints, a grievance report was not given to be filled out until 4 months after repeated concerns had occurred. - July 2024: Tenant 4's Olanzapine was given during evening slot, not at bedtime as ordered. - 07/09/2024: Care team did not assist Tenant 4 to his/her salon appointments for shaving. - 07/10/2024: Request for medication logs since 06/10/2024 remained unfulfilled.	U 272		

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 _____	R-C 10/10/2024

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 272	Continued From page 13 - 07/11/2024: Tenant 3 and Tenant 4's apartment flooded on 05/13/2024 and as of 07/11/2024, repairs remained incomplete. - 07/13/2024: Kitchen is frequently out of ingredients needed on the menu. - 07/15/2024: Medication that did not belong to Tenant 3 or Tenant 4 was found in their apartment. - July 2024: Bedding was not changed weekly. - February to July 2024: Medication was administered outside prescribed window. On 10/08/2024 at approximately 3:00 p.m., Surveyors interviewed Administrator B and Clinical Educator C. Surveyors asked if the provider had followed up regarding the above grievances and provided a written summary of findings, conclusions and any action taken. Administrator B replied, "No," and explained that since the grievances were dropped off the week of 07/22/2024 and Tenant 3 and Tenant 4 discharged on 07/31/2024, the grievances were not all followed up on.	U 272		