STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0016711	A. BUILDING: _____ B. WING _____	R-C 04/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILLOWICK	2860 LIBERTY LANE JANESVILLE, WI 53545

(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 04/04/2024, Surveyor conducted 2 verification visits at Willowick. One deficiency was identified. One of 1 deficiency was a repeat violation. See statement of deficiency (SOD) BXVC11, dated 05/27/2022. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 28	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 complete medication	U 118		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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U 118	Continued From page 1	U 118		

management and administration for 2 of 2 tenant records reviewed.

Tenant 1's sliding scale insulin units administered was not recorded from 01/01/2024-04/03/2024.

Tenant 2' sliding scale insulin units administered and blood glucose levels were not recorded from 01/01/2024-04/03/2024.

This is a repeat deficiency. See statement of deficiency (SOD) BXVC11, dated 05/27/2022.

Findings include:

Example 1: Tenant 1

On 04/04/2024, Surveyor reviewed Tenant 1's record. Tenant 1 was admitted to the provider on 06/28/2021. Tenant 1 is a diabetic. Tenant 1 is their own legal decision maker. Tenant 1's most recent assessment, dated 10/10/2022, documented that s/he required medication management services from the provider. Tenant 1's physician orders included the following:
-"Humalog Kwikpen 100 unit, Inject subcutaneously 3 times daily with meals per sliding scale: 140-190= 2 units, 191-240= 4 units, 241-290= 6 units, 291-340= 8 units, 341-390= 10 units, 391+=12 units, Call PCP."

Surveyor reviewed Tenant 1's medication administration records (MARs) from 01/01/2024-04/03/2024 and observed the following:

Between 01/01/2024-04/03/2024, staff recorded 229 blood glucose levels that would have required sliding scale insulin. There was no documentation showing how many units of insulin

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U 118	Continued From page 2 Tenant 1 was administered. Example 2: Tenant 2 On 04/04/2024, Surveyor reviewed Tenant 2's record. Tenant 2 was admitted to the provider on 08/25/2021. Tenant 2 is a diabetic. Tenant 2 is their own legal decision maker. Tenant 2's most recent assessment, dated 10/05/2022, documented that s/he required medication management services from the provider. Tenant 2's medical provider orders included the following: -"Humulin R U-500 Kwikpen, inject subcutaneously before meals per sliding scale: <100=none. 101-150=50 units, 151-250=55 units, 251-350=60 units, >351=65 units with a start date 11/08/2023-01/13/2024. -Humulin R U-500 Kwikpen, inject subcutaneously before lunch and supper per sliding scale: <100=none. 101-150= 40 units, 151-250=45 units, 251-350= 50 units, >351= 55 units with a start date 01/13/2024-03/25/2024. -Humulin R U-500 Kwikpen, inject subcutaneously before breakfast per sliding scale: <100=none. 101-150= 45 units, 151-250=50 units, 251-350= 55 units. >351= 60 units with a start date 01/13/2024-03/25/2024." Surveyor reviewed Tenant 2's MARs from 01/01/2024-04/03/2024 and observed the following: -Between 01/01/2024-04/03/2024, staff did not record Tenant 2's blood glucose levels or how many units of insulin Tenant 2 was administered. On 04/04/2024 at 12:30 PM, Surveyor interviewed Director A, Assistant Director B, and Nurse C. Surveyor noted concern in diabetic management in regard to missing documentation	U 118		

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U 118	Continued From page 3 in Tenant 1's and Tenant 2's record. Director A stated the provider had never recorded the number of sliding scale insulin administered to tenants. Director A stated staff administer sliding scale insulin per physician orders. Director A stated the provider would be following up with Tenant 2's pharmacy to include an order to track blood sugars through their electronic health record (EHR). Director A and Nurse C acknowledged Tenant 1's and Tenant 2's record should have recorded number of insulin units administered and blood glucose readings. Nurse C showed Director A, s/he had created prompts in their EHR for staff to now start recording number of insulin units given.	U 118		