STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017233	A. BUILDING: _____ B. WING _____	R-C 05/15/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ASCENSION LIVING LAKESHORE AT SIENA	**5643 ERIE ST RACINE, WI 53402**

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{N 000}	Initial Comments On 05/07/2024 with information gathered through 05/15/2024, Surveyor conducted a standard survey, verification visit and two complaint investigations at Ascension Living Lakeshore at Siena, a Community-Based Residential Facility (CBRF) in Racine, WI. Five deficiencies identified. One is a repeat deficiency from SOD FDOC11 dated 12/08/2022. Two of two complaints substantiated. Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 23	{N 000}		
N 219	83.17(1) Licensee conduct caregiver background check Caregiver background check. At the time of hire, employment or contract and every 4 years after, the licensee shall conduct and document a caregiver background check following the procedures in s. 50.065, Stats., and ch. DHS 12. A licensee shall not employ, contract with or permit a person to reside at the CBRF if the person has been convicted of the crimes or offenses, or has a governmental finding of misconduct, found in s. 50.065, Stats., and ch. DHS 12, Appendix A, unless the person has been approved under the department ' s rehabilitation process as defined in ch. DHS 12. This Rule is not met as evidenced by: Based on record review and interview, the	N 219		

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

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provider did not ensure a caregiver background check (CBC) was completed for 1 of 2 employees reviewed. Caregiver C did not have a CBC on file.

Findings include:

A complete CBC, at minimum, consists of:
1) A completed Department of Health Services Form-82064, Background Information Disclosure (BID).
2) A response from the Department of Justice (DOJ).
3) A "Response to Caregiver Background Check" letter from the Department of Health Service, also referred to as the Integrated Background Information System (IBIS). (DQA Publication-00038, Wisconsin Background Check and Misconduct Investigation Program Manual for Entities Regulated by the Division of Quality Assurance, January 2024.)

On 05/14/2024, Surveyor reviewed Caregiver C's record and identified the following:

Caregiver C was hired on 09/25/2017. His/her record did not have a BID and his/her DOJ and IBIS were dated 03/04/2020.

On 05/14/2024 at 2:23 PM, Surveyor interviewed Executive Director A about Caregiver C's background check not being completed upon hire. Executive Director A stated s/he was not able to find the background check for Caregiver C prior to 2020. Executive Director A acknowledged the background check should have been completed within 60 days of Caregiver C's hire date, which was 09/25/2017.

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N 381	Continued From page 2	N 381		
N 381	83.35(1)(a) Pre-admission and ongoing assessments. Scope. The CBRF shall assess each resident ' s needs, abilities, and physical and mental condition before admitting the person to the CBRF, when there is a change in needs, abilities or condition, and at least annually. The assessment shall include all areas listed under par. (c). This requirement includes individuals receiving respite care in the CBRF. For emergency admissions the CBRF shall conduct the assessment within 5 days after admission. This Rule is not met as evidenced by: Based on record review and interview, the provider did not assess resident's needs, abilities, and physical and mental condition for 1 of 1 resident (Resident 1) reviewed when there was a change in needs, abilities or condition. Resident 1 had new behaviors and a fractured hip without a new assessment. Findings include: On 05/08/2024 at 9:30 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 12/28/2023, with diagnoses of anxiety, dementia, history of transient ischemic attack, hyperglycemia, hyperlipidemia, and cervical myofascial pain syndrome. Resident 1's Individual Service Plan (ISP), dated 03/19/2024, stated the following: -"Cognition Behavior: Staff will provide assistance for inappropriate reaction to minimal/occasional stresses."	N 381		

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N 381	Continued From page 3 Resident 1's observation notes stated the following: 03/17/2024 at 12:04 PM -"[Resident 1] was observed sitting on the floor against door. When ask [sic] what happened the resident stated, 'I was just saying hi and [s/he] grabbed me and threw me on the ground.' referring to another resident. It appears [Resident 1] wandered into the other resident room and with time an altercation occurred. Resident denied hitting head. Reports a 'sore bottom'. PRN (as needed) Tylenol administered. Vital signs stable. Education given on not going into other residents [sic] room. Staff to monitor resident closely to ensure safety. Update POA (power of attorney)." 03/23/2024 at 2:26 PM -"[Resident 1] was in bed when aide came to inform writer that patient states [s/he] is having pain in [his/her] left leg. [Resident 1's child] was called to be notified and to see if [s/he] would like [Resident 1] sent to the ER (emergency room). [Resident 1's child] came to the facility and want resident sent to hospital. Resident left the building by ambulance to Aurora. [Resident 1] was admitted to the hospital with a fractured hip per [his/her child]." 04/27/2024 at 9:53 PM -"[Resident 1's child] brought [Resident 1] back stating [s/he] could no longer handle [his/her] behavior anymore. [Resident 1] very confused and anxious." Resident 1's record did not include assessments addressing the increase in behaviors or fractured hip.	N 381		

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N 381	Continued From page 4 On 05/14/2024 at 3:43 PM, Surveyor requested to review any assessments completed for Resident 1. Director of Clinical Services (DCS) B stated s/he did not have any assessments besides his/her assessments upon admission, . On 05/15/2024 at 2:30 PM, Surveyor interviewed Executive Director A. Executive Director A stated DCS B was responsible for completing assessments when there were falls or any behavioral changes. Executive Director A acknowledged there were no assessments completed for Resident 1 when there was a change in needs, abilities or condition.	N 381		
N 387	83.35(3)(b) Service plan development: parties involved Development. The CBRF shall involve the resident and the resident ' s legal representative, as appropriate, in developing the individual service plan and the resident or the resident ' s legal representative shall sign the plan acknowledging their involvement in, understanding of and agreement with the plan. If a resident has a medical prognosis of terminal illness, a hospice program or home health care agency, as identified in s. HFS 83.38(2) shall, in cooperation with the CBRF, coordinate the development of the individual service plan and its approval under s. HFS 83.38 (2) (b). The resident ' s case manager, if any, and any health care providers, shall be invited to participate in the development of the service plan. This Rule is not met as evidenced by:	N 387		

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N 387	Continued From page 5 Based on record review and interview, the provider did not have the resident or resident's legal representative sign the Individual Service Plan (ISP) acknowledging their involvement in, understanding of, and agreement with the plan for 2 of 2 resident records reviewed. Residents 1's and 2's ISPs did not have signatures. Findings include: Resident 1 Record Review On 05/08/2024 at 9:30 AM, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 12/28/2023, with diagnoses of anxiety, dementia, history of transient ischemic attack, hyperglycemia, hyperlipidemia, and cervical myofascial pain syndrome. Resident 1 had an activated power of attorney. Resident 1's record contained an ISP for 12/28/2023 and 03/19/2024. Both ISPs did not have a signature. Resident 2 Record Review On 05/08/2024 at 10:00 AM, Surveyor reviewed Resident 2's record. Resident 2 was admitted on 09/14/2023, with diagnoses of pressure ulcer of right buttock stage 2, pressure ulcer of left buttock, difficulty in walking, unspecified open wound of right hand, unspecified open wound of left forearm. Resident 2 had an activated power of attorney. Resident 2's record contained an ISP for 01/03/2024 and 02/01/2024. Both ISPs did not have a signature. Interviews	N 387		

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N 387	Continued From page 6 On 05/07/2024 at 12:30 PM, Director of Clinical Services (DCS) B stated s/he was responsible for conducting care plan meetings with the residents and responsible parties. DCS B stated s/he did not get signatures for Resident 1's and Resident 2's ISPs. DCS B stated there was no reason why s/he did not and s/he was aware of the requirement. On 05/15/2024 at 2:30 PM, Surveyor interviewed Executive Director A. Executive Director A confirmed DCS B was responsible for completing care plan meetings with the resident and their families. Executive Director A acknowledged there was no signed ISP for Resident 1 and Resident 2.	N 387		
{N 389}	83.35(3)(d) Service plans updated annually or on changes Individual service plan review. Annually or when there is a change in a resident ' s needs, abilities or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment under sub. (1). All reviews of the individual service plan shall include input from the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or resident ' s legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident's Individual	{N 389}		

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{N 389}	Continued From page 7 Service Plan (ISP) was reviewed and updated with changes in needs, abilities or physical or mental condition. Resident 2's ISP was not updated to reflect Resident 2's change in mobility status, wound care, and feeding assistance. This is a repeat deficiency. See Statement of Deficiency (SOD) FDOC11, dated 12/08/2022. Findings include: On 05/08/2024 at 10:00 AM, Surveyor reviewed Resident 2's record. Resident 2 was admitted on 09/14/2023 with diagnoses of pressure ulcer of right buttock stage 2, pressure ulcer of left buttock, difficulty in walking, unspecified open wound of right hand sequela, unspecified open wound of left forearm sequela. Resident 2's observation notes stated the following: 11/03/2023 at 11:44 AM, "Home PT (patient therapy) Wound nurse in to see resident wounds. Left side closed. Right side 1.3x 0.9 (0.2 red 0.7 epithelialized). FOAM (wound treatment) applied. Nurse will be back Tuesday." 11/10/2023 at 1:37 PM, "Wound nurse in stated resident wound to left and right gluteal folds are healed. No further intervention needed." 11/11/2023 at 2:10 PM, "Nurse called due to pt (patient) having a skin tear on top of left arm, pt seemed to have scratched [him/herself] with bracelets on right wrist. Skin tear measure 8 cm (centimeters) long and 2 cm wide, area cleansed and steri-strips applied." 11/16/2023 at 3:53 PM, "[Resident 2] has skin	{N 389}		

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tear to left forearm, approximately 6 cm long. CNAs (certified nursing assistants) reported that they were trying to reposition resident toward the middle of bed as [s/he] was near the edge, [s/he] resisted their efforts, pulled [his/her] arm away from CNA who was holding [his/her] arm and [his/her] skin tore. Reported to writer who measured, cleansed and dressed wound. Advised CNAs to write statements."

11/25/2023 at 12:11 PM, "Observed skin tear to resident's right hand. NOC (night of care/overnight) CNA states incident happened while trying to get resident up-resident became combative and "scratched" self. Steri-strips applied and covered with gauze dressing."

12/01/2023 at 10:27 AM, "Wound PT in and stated the right-hand skin tear appears infected. Arm is red and swollen. Call out to [doctor]. Will await call back."

12/01/2023 at 11:16 AM, "Spoke with [doctor] office and [s/he] wants to see resident. Appointment scheduled for 12/08/2023."

12/01/2023 at 12:15 PM, "Writer spoke with POA (power of attorney) and [s/he] would like resident sent to ER (emergency room) for evaluation. Ambulanz (transportation company) called and will transport to ER."

12/01/2023 at 5:10 PM, "Resident returned home from ER approx.[imately] 4:00 PM with new orders for polysporin ointment BID (twice daily) to RUE (right upper extremity) wounds (clarified with ER) and Vibramycin 1 cap[sule] BID x (for) 10 days. Resident in bed resting upon return, with no c/o (complaints of) pain/discomfort. Updated resident's [child] via phone conversation."

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12/08/2023 at 11:12 AM, "Resident refusing AM cares, yelling at staff, trying to hit. Unable to ambulate to bathroom d/t (due to) leg weakness. Call out to [Resident 1's child] and informed of behaviors and weakness."

12/10/2023 at 8:16 PM, "Resident was uncooperative with cares. Resident is swearing and swinging at staff. Writer was scratched twice on the arm by the resident when attempting to help the aide safely transfer the resident into bed, and when attempting to change the resident. Staff attempted to reorient resident and explain all cares before they were performed but resident continued being aggressive. Will continue to monitor resident for behaviors and aggression."

12/18/2023 at 11:14 AM, "Wound care nurse here to assess and redress wounds. Resident compliant with nurse. Will continue to monitor."

12/20/2023 at 9:34 AM, "Resident received order for Lasix 20 mg (milligrams) daily for 30 days for fluid overload."

12/20/2023 at 9:35 AM, "Resident went to [Doctor] office on 12/19/2023. Returned with new orders for Colace 50 mg daily, low sodium diet, daily weight with orders to updated MD (medical doctor) if weight gain more than 3#'s (pounds) and send weights weekly. Also, MD wrote orders to walk to and from dining room for lunch and dinner. Condom catheter order also received for HS (bedtime). Also order to increase citalopram from 5 mg to 10 mg. Call out to [doctor] office to send prescriptions for new orders to pharmacy. Will continue to monitor."

12/20/2023 at 1:15 PM, "Wound care PT in and

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changed resident bandages. No c/o any. Will continue to monitor."

12/24/2023 at 9:23 PM, "When getting pt ready for bed, pt became combative. Pt did not stand up for staff. Needed 3 people to get [him/her] up. With 3 people it was still difficult to do cares and pt nearly fell. Writer noticed pt right arm was red and warm to touch. Notified unit manage and scheduled for Ambulanz pickup at 07:00 AM on 12/25/2023. Family aware."

12/25/2023 at 7:15 AM, "Resident was transported via Ambulanz at 0720 to [hospital] regarding infection in R (right) arm, family notified."

12/25/2023 at 1:50 PM, "Resident update, will be sent back with script for Cefadroxil BID for 7 days for infection, also instructions to follow up with primary care provider due to small superficial clot on R arm. No preventions needed, [hospital] will set up transport back to [facility]."

12/26/2023 at 8:33 PM, Pt refused to stand up for cares tonight. Had 4 people assisted and needed to use a lift. Pt was resistive and yelling but was able to safely transfer into bed and get cleaned up."

12/29/2023 at 10:23 AM, Resident had significant weight gain 5#'s in a week. Call out to [Doctor] for new orders. Edema in BLE (bilateral lower extremities) +2. Denies any SOB. Will continue to monitor."

01/07/2024 at 11:33 AM, "Director of [Facility] called and updated with residents increased bilateral hand swelling and facial swelling. [His/her] left hand wound was draining outside of

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current dressing and resident has complaints of pain. [Director of Clinical Services B] informed to send [him/her] out to ED upon called POA. POA called and was informed of all of this and was agreeable with sending to ED. Ambulanz was called for EMS (emergency medical services) transport to arrive at 11:45 AM."

01/08/2024 at 06:28 AM, "Resident returned to [Facility] with new order for doxycycline BID x7 days for cellulitis."

01/09/2024 at 8:45 AM, "If resident has 3-5# weight gain in a day Dr (doctor) would like to be called immediately that day."

01/11/2024 at 10:14 AM, "Visiting Nurse in to change resident bandages. Will continue to monitor."

01/11/2024 at 1:59 PM, "Resident remains on antibiotic for cellulitis to left arm. Swelling and redness has minimized. Will continue to monitor."

01/15/2024 at 12:42 PM, "Writer had to feed pt at lunch due to pt sleeping at table. Lunch was roast beef and pt was chewing [his/her] food for 10 minutes. Writer got grounded meat and pt ate that with no problems. Pt ate 25% of meal."

01/15/2024 at 1:54 PM, "Visiting nurses in to do wound care on resident; found new pressure area on right hip and right ankle. Will await PRN (as needed) orders for bandage changes if soiled or missing. Resident repositioned every 2 hours. Currently resting in bed on left side with pillows at pressure points."

01/16/2024 at 2:09 PM, "Resident refused to feed

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{N 389}	Continued From page 12 self. Ate 25% of lunch with assistance then refused to eat more." 01/18/2024 at 10:08 AM, "Visiting nurse in to change wound bandages and evaluate. No new concerns at this time. Will continue to monitor." 01/22/2024 at 1:01 PM, "Call out for [Doctor] for hospice order. Will wait for call back. Wound care nurse in to do treatment on wounds. Left buttock wound is unstageable and measures 5x2.6x0cm. Right buttock wound is unstageable and measures 2x1.6x0ccm. Wound to right hip measures 4x5cm. Ankle measures 1x1.6x0cm. Treatment orders completed by Visiting nurses." 01/24/2024 at 10:22 AM, "Hospice order received from [Doctor]. Awaiting [POA] to choose which company and will move forward then." On 05/08/2024 at 10:00 AM, Surveyor reviewed Resident 2's hospital discharge summaries. On 12/01/2023, hospital discharge summary stated the following: -"Chief Complaint: Arm Pain History of Present Illness: Patient has advanced dementia and resides in a memory care unit. POA states that [s/he] has a couple wounds on [his/her] arms and skin tears have been present for a few days. POA states this was due to [his/her] arm bands that were in place at the memory care unit. POA states that [s/he] is not able to see [his/her] family doctor until next week and they were worried for infection and [s/he] was subsequently sent into the emergency department. Medical Decision Making: [Resident 2] sustained some skin tears a few days ago secondary to armbands at the memory care unit. They have since started draining and had increasing redness	{N 389}		

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	0017233	A. BUILDING: _____ B. WING _____	R-C 05/15/2024

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ASCENSION LIVING LAKESHORE AT SIENA	5643 ERIE ST RACINE, WI 53402

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{N 389}	Continued From page 13 and warmth. On examination [s/he] has skin tears with confluent erythema and warmth. After discussed with patient POA [s/he] will be started on doxycycline and Polysporin. Daily wound checks encouraged. Patient was advised to have wound checked with family doctor next week. Patient encouraged return to ED (emergency department) for new or worsening symptoms." On 12/11/2023, hospital discharge summary stated the following: -"Chief Complaint: Shortness of breath -History of Present Illness: Patient comes in for evaluation of difficulty walking and increased baseline lower extremity edema. The history is extremely limited as the patient has advanced dementia. Most of the history is obtained from the patient's [POA]. [POA] states that [s/he] is newly at [facility]. [S/he] has been there for 2 weeks. [S/he] states that the patient was more ambulatory and did walk with [his/her] walker more before going into this facility. [S/he] states that since arriving [s/he] has been spending most of [his/her] time in a wheelchair and only walking with physical therapy. [S/he] thinks this may be contributing to lower extremity edema. [S/he] reached out to [his/her] primary care clinic and furosemide was ordered today but there was concern for decompensated heart failure and so [s/he] was sent into the emergency department for evaluation. Medical Decision Making: Patient comes in for evaluation of edema. Patient has not been walking as much over the last couple weeks and has been sitting in a wheelchair most of the day. Before this [s/he] was walking more and [his/her] sedentary lifestyle change is likely the reason for [his/her] increased lower extremity edema. It may be contributing to [his/her] overall energy level as well because [his/her] lower extremities are quite	{N 389}		

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{N 389}	Continued From page 14 heavy. Plan for diuresis and close follow up with [his/her] outpatient team. The patient's [POA] agrees with this and will work for [facility] staff to get the patient up more." On 12/25/2023, hospital discharge summary stated the following: -"Chief Complaint: Arm Pain History of Present Illness: 99-year-old patient with history of Alzheimer's dementia, history of frequent falls, hypothyroidism, BPH presents to the ED via EMS for chief complaint of right arm swelling and redness. Per EMS they state they noticed around 2AM, patient afebrile throughout. EMS unsure if patient had any falls today. Patient states [s/he] is at [ED], but does not know why [s/he] is here, or date or holiday. Further history limited given patients [sic] dementia. Attempted to call facility however there has been no answer with multiple attempts. Medical Decision Making: 99-year-old patient with history of dementia presents to the ED for concern for right arm swelling and redness noted for 1 day. Patient notable for multiple skin tears to [his/her] upper extremities that do appear older. Intract right radial pulse, lower suspicion which for acute limb ischemia or compartment syndrome, but was considered. Head is atraumatic at this time, blood cultures, lactic acid, CBC (complete blood count), CMP (comprehensive metabolic panel), no other acute trauma on exam. Patient's skin feels warm to the touch. Sepsis order set ordered for CBC, CMP, lactic blood cultures as well as 1 L (liter) of Normosol, CT (computed tomography) noncontrast of the head, x-ray of the right forearm and humorous and ultrasound of the right upper extremity eval[uation] for possible DVT (deep vein thrombosis). Vital signs relatively stable, borderline febrile no tachycardia."	{N 389}		

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{N 389}	Continued From page 15 On 01/07/2024, hospital discharge summary stated the following: -"Chief Complaint: Facial Swelling History of Present Illness: 99-year-old with Alzheimer's dementia who resides in a living facility who presents for evaluation of left-hand redness and swelling. [S/he] reportedly has chronic wound to this area that has been monitored. Apparently started getting more red, warm and swollen over the past 24 hours or so. Patient does not provide any history at this time. Ambulance crew reported that the [facility] said that [s/he] was having some swelling around [his/her] eyes and face but it has reportedly gotten better as the day has gone on. [S/he] was not had any new medications recently but was started on Lasix after recent hospital admission for some bilateral leg swelling. Medical Decision Making: Patient presents for evaluation of the left wrist redness and swelling, ongoing since yesterday or today that the memory care staff noticed. [S/he] reportedly had some swelling earlier, EMS reports that it has gotten better. I do not appreciate any facial swelling on my exam. [S/he] has some chronic appearing wounds and the chronic left dorsal wrist wound does appear to have a secondary cellulitis around it at this time, [s/he] is afebrile and nontoxic appearing. I do not feel work necessary, do not feel IV (intravenous) antibiotics necessary, will start [him/her] on doxycycline and plan for discharge." On 05/08/2024 at 11:00 AM, Surveyor reviewed Resident 2's Individual Service Plans (ISPs). Resident 2 had an ISP dated for 09/19/2023, 01/03/2024, and 02/01/2024. None of the ISPs indicated where Resident 2 had wound care/skin tears, edema with daily weights to primary	{N 389}		

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{N 389}	Continued From page 16 physician, needed feeding assistance, and needed two plus staff at times for transfers. Resident 2's ISP dated 02/01/2024 stated the following: -"Ambulation/Mobility: Staff will provide stand-by assistance with ambulation and transfer. -Health Management: Staff to keep wound bandages clean and dry. Requires therapy PT (physical therapy), OT (occupational therapy) and wound treatment." On 05/15/2024 at 2:30 PM, Surveyor interviewed Executive Director A. Executive Director A stated DCS B would be the one in charge of completing updated ISPs if there was a change in condition. Executive Director A acknowledged Resident 2's ISP was not updated to reflect his/her mobility status, wound care, and feeding assistance.	{N 389}		
N 406	83.37(1)(g) Disposition of medications. Disposition of medications. 1. When a resident is discharged, the resident ' s medications shall be sent with the resident. 2. If a resident ' s medication has been changed or discontinued, the CBRF may retain a resident ' s medication for no more than 30 days unless an order by a physician or a request by a pharmacist is written every 30 days to retain the medication. 3. The CBRF shall develop and implement a policy for disposing unused, discontinued, outdated, or recalled medications in compliance with federal, state and local standards or laws. The CBRF shall arrange for the stored medications to be destroyed in compliance with standard practices. Medications that cannot be returned to the pharmacy shall be separated from other medication in current use in the facility and stored	N 406		

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N 406	Continued From page 17	N 406		

in a locked area, with access limited to the administrator or designee. The administrator or designee and one other employee shall witness, sign, and date the record of destruction. The record shall include the medication name, strength and amount.

This Rule is not met as evidenced by:
Based on record review and staff interview, the provider did not develop and implement a policy of disposing unused, discontinued, outdated, or recalled medications in compliance with federal, state. and local standards or laws. The provider did not have a record of destroyed medications for 1 of 1 resident (Resident 1) to include the medication name, strength and amount with a witness who signed and dated the date of destruction.

Findings include:

On 04/28/2024, the Department received a complaint alleging a resident's medication packs contained 2 different physician orders for Tylenol and should only have one physician order for his/her Tylenol.

On 05/07/2024 at 12:30 PM, Surveyor interviewed Director of Clinical Services B. DCS B stated Resident 1 moved from the nursing home to the assisted living and when s/he moved, the Tylenol order from the nursing home was never taken off so s/he had two orders for Tylenol when it should have only been one order. DCS B stated Resident 1 should only be receiving Tylenol 325 milligrams (mg) two capsules twice a day, not Tylenol 500 mg two capsules twice a day. Surveyor asked DCS B if Resident 1 was

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N 406	Continued From page 18 receiving both doses of Tylenol then since the Tylenol 500 mg was never discontinued or taken out of the strip packaging. DCS B reported s/he was only receiving the Tylenol 325 mg and the medication passers were taking the Tylenol 500 mg out of the strip packing to destroy. Surveyor asked DCS B if this documentation was on Resident 1's Medication Administration Record (MAR). DCS B reported it was not because they were pulling the medication and then destroying it right away. On 05/07/2024 at 1:00 PM, Surveyor requested to review facility's medication destruction log. DCS B stated they did not have a medication destruction log for medications unless they were narcotics so s/he would not have documentation of Resident 1's Tylenol 500 mg being destroyed. On 05/15/2024, at approximately 2:00 PM, Surveyor reviewed above information with Executive Director A and Director of Nursing D. Executive Director A and DON D acknowledged that they needed to document the medication name, strength, and amount of all medications, even those that are not narcotics, when they are destroyed and signed off by two staff.	N 406		