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{N 000}	Initial Comments On 11/13/2023, Surveyors conducted a standard licensure survey, a verification visit and a complaint investigation at SV South Beloit North. Seven deficiencies were identified. Two of the 7 deficiencies were repeat violations (see Statement of Deficiency (SOD) GU6113, SOD GU6114, GU6115 and SOD JWG211). Complaint was substantiated. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 17	{N 000}		
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 administer medications in the intervals prescribed by a practitioner for 7 of 7 residents reviewed. Resident 5's Vitamin B-1 was not administered at the prescribed times due to unavailability. Resident 6's Fluticasone was not administered at the prescribed times due to unavailability. Resident 6 had a PRN (as needed) Ventolin inhaler which was not utilized when s/he	N 352		

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

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experienced low oxygen levels and a cough.
Resident 7 did not receive his/her prescribed Hydrocodone-Apap 5-325, Aripiprazole 5MG tablet, Triamcinolone 0.1% cream, and Lidocaine 5% Patch due to the unavailability of the medication.
Resident 8's Lorazepam and Fluticasone were not administered at the prescribed times due to unavailability.
Resident 13's Fluticasone was not administered at the prescribed times due to unavailability.
Resident 15 was to receive his/her prescribed Furosemide (medication for edema) thirty minutes after the administration of his/her prescribed Metolazone (diuretic); the parameters were not followed.
Resident 16 did not receive his/her prescribed Super B Complex with C Capsule and Vitamin B-6 50MG tablet due to the unavailability of the medication.

This deficiency was initially issued with Statement of Deficiency (SOD) JWG211, dated 06/17/2020.

Findings Include:

On 11/10/2023, the Department received a concern that residents were not receiving proper medication administration.

On 11/13/2023, Surveyors reviewed Resident 5's, Resident 6's, Resident 7's, Resident 8's, Resident 13's, Resident 15's, and Resident 16's record.

Example 1: Resident 5
Resident 5's 2023 November Medication Administration Record (MAR) documented the following prescribed medication and administration times:
"Vitamin B-1 100 MG (milligram) tab (tablet), Take

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N 352	Continued From page 2 1 tablet by mouth daily for ETOH (alcohol) abuse. Start Date: 10/09/2023" 11/09/2023 - med pending delivery Example 2: Resident 6 Resident 6 was admitted to the facility, 10/01/2023, with diagnoses including Grover's disease (skin disorder), developmental disability, speech/language disorder, and affliction disorder (seasonal depression). Resident 6 had an activated power of attorney. Resident 6's "Observations" documented: "11/06/2023 4:30 PM - Resident has not been feeling well today ... writer faxed residents PCP (primary care physician) to see if [s/he] could prescribe something for cough/cold symptoms ..." "11/07/2023 5:30 AM - Resident hasn't been feeling well ..." "11/07/2023 9:45 PM - Not a good day for [Resident 6]. ... still coughing and not feeling good." "11/11/2023 7:30 PM - Staff recorded oxygen levels at 79 and took a second reading to make sure and the second reading read 76 and declined to 67." "11/11/2023 8:00 PM - Staff called 911 due to [his/her] oxygen being less than 80 ... 911 dispatcher directed staff to administer [his/her] Ventolin inhaler to keep [him/her] stable and comfortable. Upon EMT's (emergency medical technicians) arrival, they recorded [his/her] oxygen level and their monitor read 94. [Resident 6] told EMT's [s/he] was fine ..." "11/11/2023 8:30 PM - Writer took residents ... O2 (oxygen) levels were 79 ... resident only ate a small amount and a couple sips of the juice." "11/12/2023 9:00 PM - Upon second shift arrival [s/he] claimed [s/he] wanted to go back to the hospital because [s/he] doesn't feel good."	N 352		

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N 352	Continued From page 3 On 11/13/2023, at approximately 1:45 PM, Surveyor observed Resident 6's Ventolin inhaler in the med cart with Med Passer R. The inhaler's label documented 200 metered inhalations and a dispense date of 10/23/2023. Surveyor read the remaining doses which was 202. Med Passer R stated the inhaler had not been used. Resident 6's 2023 October and November Medication Administration Record (MAR) documented the following prescribed medications and administration times: "Ventolin inhaler - inhale 2 puffs by mouth every 6 hours as needed for wheezing or cough" Resident 6's 2023 MARs did not document that this medication had been administered. "Fluticasone Prop - 50 MCG (microgram) spray - administer 1 spray into nasal cavity 2 times daily. Start Date: 08/01/2023" 11/07/2023 7:27 PM - Not in cart 11/11/2023 8:15 PM - Medication pending delivery 11/12/2023 7:41 PM - Medication pending delivery 11/13/2023 7:30 AM - Medication pending delivery Resident 6's individual service plan (ISP), dated 10/17/2023, documented: "Medications: Medications administered by staff." "Capacity for Self Direction: Makes needs known." "General Health - Monitoring: To have monitoring of general health. Keep accurate record of all communications with MD (medical doctor)." "Negative Mood/Negative Behavior - Redirectable: [Resident 6] will hoot and holler throughout the night, [s/he] appears very happy throughout the day. [S/he] likes to sing about [his/her] home. [S/he] does get upset if [his/her]	N 352		

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hair isn't done on Thursdays. Staff will follow care plan for redirection techniques when needed."

Example 3: Resident 7
Resident 7 was admitted on 05/18/2019 with diagnoses including schizoaffective disorder and bipolar disorder. Resident 7 is their own legal decision maker. Resident 7's individual service plan (ISP) dated 10/12/2023 documented "Medications administered by staff."

Resident 7's 2023 October and November MAR documented the following prescribed medication and administration times:

"Hydrocodone-Apap 5-325, take 1 tablet every 12 hours as needed for severe pain. Start date: 09/16/2023."
10/15/2023-10/20/2023-8am and 8pm doses-medication pending delivery.

"Aripiprazole 5MG tablet, take 1 tablet by mouth every morning for schizoaffective disorder, depressive type. Start date: `10/19/2023."
11/08/2023-11/11/2023-medication pending delivery, 11/12/2023-administered, 11/13/2023-medication pending delivery.

"Triamcinolone 0.1% cream, apply topically to left thigh daily for rash. Start date: 08/18/2023."
11/09/2023-11/11/2023- medication pending delivery, 11/12/2023-administered, 11/13/2023-medication pending delivery.

"Lidocaine 5% Patch, apply 1 patch topically to right posterior knee *apply at 8am; off at 8pm*. Start date: 08/22/2023."
11/12/2023-11/13/2023-medication pending delivery.

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N 352	Continued From page 5 Example 4: Resident 8 Resident 8's 2023 November MAR documented the following prescribed medication and administration times: "Lorazepam 0.5 MG tablet, Take 1 Tablet by mouth at bedtime for anxiety/agitation. Start Date: 09/30/2023" 11/05/2023 7:00 PM - No pass pending out for deliver "Fluticasone Prop - 50 MCG spray - instill 2 sprays in each nostril daily for nasal congestion. Start Date: 10/09/2023" 11/06/2023 6:52 AM - Medication pending delivery 11/09/2023 9:39 AM - Medication pending delivery 11/10/2023 7:58 AM - Medication pending delivery 11/11/2023 8:56 AM - Medication pending delivery Example 5: Resident 13 Resident 13's 2023 November MAR documented the following prescribed medication and administration times: "Fluticasone Prop - 50 MCG spray - use 2 sprays into each nostril daily for nasal congestion. Start Date: 11/08/2023." 11/11/2023 8:18 AM - Not in cart 11/11/2023 1:14 PM - Medication pending delivery 11/11/2023 8:36 PM - Medication pending delivery 11/08/2023 8:43 AM - No pass per vital parameters 11/09/2023 7:14 AM - Medication pending delivery 11/10/2023 8:17 AM - Medication pending delivery 11/11/2023 8:17 AM - Medication pending delivery 11/13/2023 7:05 AM - Medication pending	N 352		

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N 352	Continued From page 6 delivery "Ipratropium spray - Administer 2 sprays into the mouth 3 times daily for drooling. Start Date: 10/09/2023." 11/07/2023 7:52 PM - Not in cart 11/08/2023 8:43 AM - No pass per vital parameters 11/10/2023 8:19 AM - Not available 11/10/2023 2:03 PM - Medication pending delivery Example 6: Resident 15 Resident 15 admitted to the facility, 09/12/2023, with diagnoses including Type 2 diabetes, hypertension, heart failure and pain. Resident 15's 2023 November MAR documented the following medications and documented administration times: "Metolazone - Take 1 tablet by mouth at 7:30 AM. Take 30 minutes prior to Furosemide. Do not give Furosemide for 30 minutes after this medication." "Furosemide - Take 1 tablet by mouth daily for heart failure. Must administer 30 minutes after giving Metolazone." 11/02 - Metolazone given at 7:12 AM; Furosemide given at 7:15 AM - 3-minute separation 11/03 - Metolazone given at 7:06 AM; Furosemide given at 7:22 AM - 16-minute separation 11/05 - Metolazone given at 7:12 AM; Furosemide given at 7:25 AM - 13-minute separation 11/08 - Metolazone given at 7:20 AM; Furosemide given at 7:20 AM 11/10 - Metolazone given at 7:53 AM; Furosemide given at 7:53 AM 11/12 - Metolazone given at 7:33 AM; Furosemide given at 7:34 AM - 1-minute separation	N 352		

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N 352	Continued From page 7 11/13 - Metolazone given at 7:03 AM; Furosemide given at 7:03 AM Example 7: Resident 16 Resident 16 was admitted on 07/18/2023 with diagnoses including vitamin D deficiency, bipolar disorder, anxiety disorder, and Parkinson's disease. Resident 16 had an activated healthcare power of attorney that made decisions on his/her behalf. Resident 16's ISP dated 09/21/2023 documented "Medications administered by staff." Resident 16's 2023 November MAR documented the following prescribed medications and administration times: "Super B Complex with C Capsule, Take 1 capsule by mouth daily. Start date: 07/18/2023." 11/08/2023-11/13/2023-medication pending delivery. "Vitamin B-6 50MG tablet, take 1 tablet by mouth daily. Medication is in top drawer. Let House Manager know when supply is running low so this can be reordered. Start date: 07/18/2023." 11/09/2023-11/13/2023-medication pending delivery. On 11/13/2023 at 3:45 PM, Surveyors interviewed Administrator L, Health Coordinator M and House Manager Q. Surveyor expressed concern Resident 7 went 6 days without receiving his/her psychotropic medication. Administrator L stated after looking through the medication cart the provider cannot locate Resident 7's Aripiprazole and noted staff should not have initialed administered on 11/12/2023, since the medication was not available. Administrator L noted ongoing system errors with medication administration. Administrator L stated staff would be retrained in medication administration. Surveyors asked for	N 352		

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N 352	Continued From page 8 an explanation for medications not being available for administration. Administrator L stated that there had been delays in medications being reordered and delivered in a timely manner. Administrator L stated the process would be reviewed with staff and the pharmacy. Surveyor reviewed staff direction by EMTs in Resident 6's observation notes and reviewed his/her inhaler where it was determined the inhaler had not been used. Administrator L stated Resident 6 was able to tell them if s/he wanted to use his/her inhaler. Cross Reference: N0415 DHS 83.37(2)(d) Documentation of Medication Administration	N 352		
N 386	83.35(3)(a) Comprehensive Individualized Service Plan Comprehensive individual service plan. Scope. Within 30 days after admission and based on the assessment under sub. (1), the CBRF shall develop a comprehensive individual service plan for each resident. The individual service plan shall include all of the following: 1. Identify the resident ' s needs and desired outcomes. 2. Identify the program services, frequency and approaches under s. HFS 83.38(1) the CBRF will provide. 3. Establish measurable goals with specific time limits for attainment. 4. Specify methods for delivering needed care and who is responsible for delivering the care. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not ensure 1 of 1 resident had a completed comprehensive	N 386		

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Individual Service Plan (ISP) within 30 days of admission, which included the resident's needs and desired outcomes; and did not establish measurable goals with specific time limits for attainment.

Resident 15's ISP did not identify that s/he utilized a continuous positive airway pressure (CPAP) machine and care guidelines for staff.

Findings include:

On 11/13/2023, at approximately 9:35 AM, Surveyor interviewed Resident 15 in his/her bedroom. Surveyor noted a CPAP machine stacked on top of some items that looked like metal brief cases next to the resident's recliner. Surveyor asked if Resident 15 utilized the CPAP machine. Resident 15 stated that s/he did not like to sleep in the bed because s/he was scared it was going break, so s/he sleeps in his/her recliner and staff had not set up his CPAP machine which s/he is to utilize during sleeping hours. Surveyor noted Resident 15's bed was a hospital bed. Surveyor observed oxygen tanks sitting in Resident 15's room.

On 11/13/2023, Surveyor reviewed Resident 15's record.

Resident 15 was admitted to the facility, 09/12/2023, with diagnoses including hypertension, diabetes, and IDM (idiopathic disease of myocardium [cardiovascular]).

Resident 15's "Pre-Admission Evaluation," dated 06/29/2023, did not document any information regarding sleep patterns.

Resident 15's ISP, dated 10/13/2023,

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documented:
"Sleep Preferences/Patterns - Staff to note residents current sleep pattern during the night."
"Medication Management - Resident has concerns or troubles managing and administering own medication. See MAR (medication administration record) for Medications that have been administered."

Resident 15's October and November 2023 MAR did not document that s/he utilized a CPAP machine.

Resident 15's "Observation" notes, dated 10/01/2023 to 11/12/2023, did not document any comments regarding his/her CPAP machine. There was one entry that Surveyor did not understand:
"11/10/2023 - Writer received a phone call from [vendor] stating that they would be delivering adapter for oxygen so that it could be tied in with oxygen ..."

On 11/13/2023 at 3:45 PM, Surveyors interviewed Administrator L, Health Coordinator M and House Manager Q. Surveyor discussed the conversation and observations s/he had with Resident 15. Health Coordinator M stated s/he was aware that Resident 15 slept in his/her chair, even after the hospital bed was fixed, and that s/he utilized his CPAP machine, since admittance, even when sleeping in the recliner. Surveyor stated Resident 15's ISP did not outline that s/he utilized a CPAP machine and/or his/her sleeping preferences. Administrator L stated Resident 15's ISP would be reviewed and updated.

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N 408	83.37(1)(i) PRN psychotropic medication. As needed (PRN) psychotropic medication. When a psychotropic medication is prescribed on an as needed basis for a resident, the CBRF shall do all of the following: 1. The resident ' s individual service plan shall include the rationale for use and a detailed description of the behaviors which indicate the need for administration of PRN psychotropic medication. 2. The administrator or qualified designee shall monitor at least monthly for the inappropriate use of PRN psychotropic medication, including but not limited to, use contrary to the individual service plan, presence of significant adverse side effects, use for discipline or staff convenience, or contrary to the intended use. 3. Documentation in the resident ' s record shall include the rationale for use, description of behaviors requiring the PRN psychotropic medication, the effectiveness of the medication, the presence of any side effects, and monitoring for inappropriate use for each PRN psychotropic medication given. This Rule is not met as evidenced by: Based on record review and staff interview, the provider did not ensure that 2 of 2 residents prescribed PRN (as needed) psychotropic medication was documented on the Individualized Service Plan (ISP). Resident 8's and Resident 16's ISP did not identify that s/he was on PRN Lorazepam or include a rationale for use, nor a detailed description of the behaviors, which would indicate the need for administration. Findings include: On 11/13/2023, Surveyor reviewed Resident 8's and Resident 16's record. The following was	N 408		

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found:

Example 1-Resident 8

Resident 8's 2023 October and November MAR (Medication Administration Record) documented the following prescribed medication and administration times:

"Lorazepam 0.5 MG (milligram) tablet, Take one tablet by mouth every two hours as needed for anxiety/agitation. Start Date: 03/31/2023"
10/11/2023 - 7:41 AM - Yelling at staff and [s/he] was up all night
11/09/2023 - 6:28 PM - Anxiety
11/12/2023 - 4:06 PM - Very agitated about why [s/he] is here at [facility] and was talking about leaving the facility because [s/he] doesn't live here

Resident 8's "Observations," documented:
10/11/2023 - " ... Staff reports that [s/he] has been yelling while in room and yelling out in common area so much that some other residents don't even want to come out to eat. When asked about this [s/he] states that [s/he] must yell to be listened too. [S/he] has been wandering into other residents room during the night and yelling. An as needed lorazepam was used today that seemed to help a little. I felt that a lot of [his/her] behaviors today were attention seeking. ..."
11/12/2023 - "[S/he] was very anxious today and mentioned that a lot of times throughout shift. [S/he] made a statement that [s/he] needs to leave this place because [s/he] doesn't live here and everybody else got a chance to leave. Staff assured [him/her] this is [his/her] home and [s/he] became agitated raising [his/her] voice."

Resident 8's ISP, dated 10/26/2023, documented:

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N 408	Continued From page 13 "Medication Management: Staff administers all PRN and scheduled medications." "Change of Condition Monitoring: [Resident 8] is not able to communicate illness or other concerns to staff." "Resident has trouble remembering ADL's (activities of daily living). Resident often forgets whereabouts, time, and day. Resident often expresses to staff feelings of being scared. Resident become agitated and sometimes physically aggressive with staff." "Interventions & Frequency of Interventions: Reassuring resident's safety. Answering resident's questions. Giving the resident a snack. Distracting the resident 2with an activity. Contacting residents POA (power of attorney). Helping resident with ADL's" "Negative Mood/Negative Behavior - Redirectable: Has a history of calling out for help throughout the day and night staff will respond to [his/her] calls and document [his/her] concerns. Has mild repeat attention seeking behaviors [s/he] is known to call out for help or scream out when [s/he] is confused with [his/her] environment, [s/he] believes people are talking to [him/her] when it's the radio and when [s/he] needs emotional support." "Interventions & Frequency of Interventions: Staff will respond to all [Resident 8's] behaviors. 1 by assuring [him/her] that [s/he] isn't alone. 2 by addressing [his/her] concerns. 3 by redirecting [him/her] to something else in [his/her] room that is positive. 4 by offering [him/her] other things to do like activities snacks and toileting. 5 by spending one on one time with [him/her]." Example 2-Resident 16 Resident 16 was admitted on 07/18/2023 with	N 408		

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N 408	Continued From page 14 diagnoses including vitamin D deficiency, bipolar disorder, anxiety disorder, and Parkinson's disease. Resident 16 had an activated healthcare power of attorney that made decisions on his/her behalf. Resident 16's ISP dated 09/21/2023 documented "Medications administered by staff." Resident 16 had a physician order for Lorazepam 1mg by mouth daily as needed for anxiety, with a start date of 07/26/2023. Resident 16's ISP, last revised 09/21/2023 did not include the rational for the use and description of behaviors requiring the use of the PRN. On 11/13/2023 at 3:45 PM, Surveyors interviewed Administrator L, Health Coordinator M and House Manager Q. Surveyors reviewed Resident 8's and Resident 16's ISP with Administrator L and House Manager Q and stated that Resident 8's and Resident 16's ISP documents behaviors that s/he had experienced but the ISP stated that s/he was redirectable; it does not list that s/he is prescribed PRN Lorazepam and what specific behaviors would not be considered baseline and would warrant the administration of the medication. Administrator L stated s/he would review Resident 8's and Resident 16's ISP and ensure that it was individualized.	N 408		
N 410	83.37(1)(k) Medication error or adverse reaction. Medication error or adverse reaction. 1. The CBRF shall document in the resident ' s record any error in the administration of prescription or over-the-counter medication, known adverse drug reaction or resident refusal to take medication. 2. The CBRF shall report all errors in the administration of medication and any adverse drug reactions to a licensed practitioner,	N 410		

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N 410	Continued From page 15 supervising nurse or pharmacist immediately. Unless otherwise directed by the prescribing practitioner, the CBRF shall report to the prescribing practitioner, supervising nurse or pharmacist as soon as possible after the resident refuses a medication for 2 consecutive days. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not report all errors in medication administration to the prescribing practitioner, supervising nurse or pharmacist as soon as possible when the resident did not receive his/her medication for more than 2 consecutive days for 1 of 1 record reviewed. Resident 14 did not receive his/her scheduled Mirtazapine (antidepressant) from 10/26/2023 to 11/13/2023. Findings include: On 11/10/2023, the Department received a concern that residents were not receiving proper medication administration. On 11/13/2023, Surveyor reviewed Resident 14's record. Resident 14 admitted to the facility, 06/09/2021, with diagnosis including chronic kidney disease and major depressive disorder. Resident 14's 2023 October and November Medication Administration Record documented the following prescribed medication and administration times:	N 410		

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N 410	Continued From page 16 "Mirtazapine 30 MG - Take one-half tablet (15 MG) by mouth daily at bedtime for major depressive disorder. Start Date: 03/02/2022." 10/26/2023 8:24 PM - Medication pending delivery 10/27/2023 8:04 PM - Medication pending delivery 10/28/2023 8:11 PM - Medication pending delivery 10/29/2023 8:21 PM - Refused by Resident 10/30/2023 7:32 PM - Medication pending delivery 10/31/2023 7:53 PM - Medication pending delivery 11/01/2023 7:12 PM - Medication pending delivery 11/02/2023 7:34 PM - Medication pending delivery 11/03/2023 7:46 PM - Medication pending delivery 11/04/2023 7:03 PM - Medication pending delivery 11/05/2023 7:54 PM - Medication pending delivery 11/06/2023 7:53 PM - Medication pending delivery 11/07/2023 7:38 PM - Not available in cart 11/08/2023 10:18 PM - Medication pending delivery 11/09/2023 8:31 PM - Medication pending delivery Resident 14's "Observation" notes, dated 10/01/2023 to 11/13/2023, documented 12 entries with no statements regarding medications. Resident 14's individual service plan, dated 10/12/2023, documented: "Medications: Medications administered by staff." "Medication Management - Full Assist: Resident	N 410		

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has concern or troubles managing and administering own medication. See MAR for Medications That Have Been Administered. Receive Medications as they are ordered my [sic: by] MD (medical doctor)."

On 11/13/2023, at approximately 9:15 AM, Surveyor interviewed Resident 14. Surveyor asked him/her if s/he had any concerns regarding his/her medications. Resident 14 stated, "I don't think so, I take what they give me. I go to dialysis."

On 11/13/2023, at approximately 1:45 PM, Surveyor observed Resident 14's medications in the med cart. Surveyor did not observe any Mirtazapine.

On 11/13/2023 at 3:45 PM, Surveyors interviewed Administrator L, Health Coordinator M and House Manager Q. Administrator L and Health Coordinator M stated s/he would follow up with Resident 14's primary physician as staff could not definitively state Resident 14's physician had been contacted.

"Do not stop taking mirtazapine, even when you feel better. With input from you, your health care provider will assess how long you will need to take the medicine. Missing doses of mirtazapine may increase your risk for relapse in your symptoms. Stopping mirtazapine abruptly may result in one or more of the following withdrawal symptoms: irritability, nausea, dizziness, vomiting, nightmares, headache, and/or paresthesias (prickling, tingling sensation on the skin). Depression is also a part of bipolar illness. People with bipolar disorder who take antidepressants may be at risk for "switching" from depression into mania. Symptoms of mania

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N 410	Continued From page 18 include "high" or irritable mood, very high self-esteem, decreased need for sleep, pressure to keep talking, racing thoughts, being easily distracted, frequently involved in activities with a large risk for bad consequences (for example, excessive buying sprees). Medical attention should be sought if serotonin syndrome is suspected. Please refer to serious side effects for signs/symptoms." (Source: NAMI (National Alliance on Mental Illness) website, Mirtazapine (Remeron), January 2024, https://www.nami.org/About-Mental-Illness/Treatments/Mental-Health-Medications/Types-of-Medication/Mirtazapine-(Remeron) (retrieval date - February 02/01/2024).)	N 410		
N 415	83.37(2)(d) Documentation of medication administration. Documentation of medication administration. As required under s. DHS 83.42(1)(o), at the time of medication administration, the person administering the medication or treatment shall document in the resident record the name, dosage, date and time of medication taken or treatments performed and initial the medication administration record. Any side effects observed by the employee or symptoms reported by the resident shall be documented. The need for any PRN medication and the resident ' s response shall be documented. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure proper documentation of the Medication Administration Record (MAR) for 3 of 3 residents reviewed.	N 415		

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N 415	Continued From page 19 This requirement is being cited for a fourth time. See Statements of Deficiency (SOD) JWG211, dated 07/27/2020, SOD GU6114, dated 06/16/2022, and SOD GU6115, dated 08/25/2022. Findings include: On 11/10/2023, the Department received a concern that residents were not receiving proper medication administration. On 11/13/2023, Surveyors reviewed Resident 8's Example 1: Resident 5 Resident 5's 2023 November Medication Administration Record (MAR) documented the following prescribed medication and administration times: "Warfarin Sodium 7.5 MG. Take 1 tablet by mouth on Monday, Wednesday, and Friday. Next INR (blood test) due 11/14/2023. Start Date: 10/30/2023" 11/11/2023 8:33 PM (Saturday) - Resident medication pending delivery Surveyor noted the medication is not to be administered on a Saturday. Example 2: Resident 6 Resident 6's 2023 November MAR documented the following prescribed medication and administration times: "Fluticasone Prop - 50 MCG (microgram) spray - administer 1 spray into nasal cavity 2 times daily. Start Date: 08/01/2023" 11/07/2023 7:27 PM - Not in cart 11/08/2023 7:56 AM - documented as administered by Med Passer R 11/08/2023 8:00 PM - left blank	N 415		

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N 415	Continued From page 20 11/09/2023 Hospital 11/10/2023 Hospital' 11/11/2023 8:00 AM - Hospital 11/11/2023 8:15 PM - Medication pending delivery 11/12/2023 7:35 AM - documented as administered by Med Passer S 11/12/2023 7:41 PM - Medication pending delivery 11/13/2023 7:30 AM - Medication pending delivery Surveyor noted medication was documented as administered when medication was not available. Example 3: Resident 8 Resident 8's 2023 November MAR documented the following medication administration: "Fluticasone Prop- 50 MCG (microgram) spray - instill 2 sprays in each nostril daily for nasal congestion. Start Date: 10/09/2023" 11/06/2023 6:52 AM - Medication pending delivery 11/09/2023 9:39 AM - Medication pending delivery Surveyor noted that Med Passer R documented the medication as administered when it was not available. On 11/13/2023 at 3:45 PM, Surveyors interviewed Administrator L, Health Coordinator M and House Manager Q. Administrator L stated staff would be retrained on the importance of medication administration. Administrator L stated staff should never be signing that they have administered a medication when the medication was not available. Surveyors commented that throughout the review of resident MARs, the code NPV (no pass per vitals) was utilized for medications that did not require vitals numerous times when the resident had actually refused.	N 415		

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N 415	Continued From page 21 Administrator L stated s/he would discuss this concerns with the med passers. Cross Reference: N0352 DHS 83.32(3)(h) Rights of Residents: Receive Medication	N 415		
N 431	83.38(1)(g) Health monitoring. 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: Health monitoring. 1. The CBRF shall monitor the health of residents and make arrangements for physical health, oral health or mental health services unless otherwise arranged for by the resident. Each resident shall have an annual physical health examination completed by a physician or an advanced practice nurse as defined in s. N 8.02(1), unless seen by a physician or an advanced practice nurse as defined in s. N 8.02(1) more frequently. 2. When indicated, a CBRF shall observe residents ' food and fluid intake and acceptance of diet. The CBRF shall report significant deviations from normal food and fluid intake patterns to the resident ' s physician or dietician. 3. The CBRF shall document communication with the resident ' s physician and other health care providers, and shall record any changes in the resident ' s health or mental health status in the resident ' s record.	N 431		

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N 431	Continued From page 22 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 3 of 3 records reviewed received appropriate health monitoring to meet his/her needs. Resident 7's medical provider was not notified on 16 occasions when his/her blood pressure was within notification parameters. Resident 14 received his/her prescribed Midodrine when parameters had not been met and did not receive all dosages due to the unavailability of the medication. Resident 15 had a diagnosis of Type 2 diabetes and his/her blood sugar (BS) parameters had not been identified. Findings include: On 11/10/2023, the Department received a concern that residents were not receiving proper medication administration. On 11/13/2023, Surveyor reviewed Resident 6's, Resident 7's, and Resident 14's record. The following was found: Example 1: Resident 7 Resident 7 was admitted on 05/18/2019 with diagnoses including schizoaffective disorder and bipolar disorder. Resident 7 is their own legal decision maker. Resident 7's individual service plan (ISP) dated 10/12/2023 documented	N 431		

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N 431	Continued From page 23 "Medications administered by staff." Surveyor reviewed Resident 7's physician orders, which included the following: "Metoprolol 25 MG Tab with instructions to, take 0.5 tablet by mouth daily. Update if [systolic blood pressure] less than 110 or greater than 180; [diastolic blood pressure] less than 55 or greater than 100 and pulse less than 55 or greater than 120 [beats per minute]." Surveyor reviewed Resident 7's MAR's from 10/01/2023-11/13/2023, and observed the following occasions in which Resident 7's blood pressure was within notification parameters: -10/01/2023: Blood pressure documented as 106/71 -10/06/2023: Blood pressure documented as 98/76 -10/08/20/23: Blood pressure documented as 97/80 -10/11/2023: Blood pressure documented as 92/68 -10/12/2023: Blood pressure documented as 98/79 -10/17/2023: Blood pressure documented as 78/55 -10/19/2023: Blood pressure documented as 90/78 -10/20/2023: Pulse documented as 54 -10/25/2023: Blood pressure documented as 95/63 -10/26/2023: Blood pressure documented as 98/58 -11/01/2023: Blood pressure documented as 105/84 -11/02/2023: Blood pressure documented as 91/69	N 431		

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-11/03/2023: Blood pressure documented as 96/67
-11/08/2023: Blood pressure documented as 100/66
-11/09/2023: Pulse was documented as 53
-11/13/2023: Blood pressure documented as 86/61

There was no evidence in Resident 7's record of his/her medical provider having been notified of the above 16 occasions.

Example 2: Resident 14

Resident 14 admitted to the facility, 06/09/2021, with diagnosis including chronic kidney disease.

Resident 14's 2023 November Medication Administration Record (MAR) documented the following prescribed medication and administration times:
"Midodrine 5 MG Tablet - Take 1 tablet by mouth ONLY if top number is below 90. Check blood pressure (BP) at EACH dosing time. Start Date: 10/09/2023."
11/01/2023 7:24 AM - NPV (no pass per vitals), Vitals were not recorded.
11/01/2023 19:12 (7:12 PM) - NPV - Vitals were not recorded.
11/02/2023 8:13 AM, BP 117/83 - Documented as administered, did not meet parameters.
11/02/2023 7:33 PM - Medication Pending Delivery, Vitals were not recorded.
11/03/2023 7:46 PM - Medication Pending Delivery, Vitals were not recorded.
11/04/2023 7:05 AM - NPV, Vitals were not recorded.
11/04/2023 7:03 PM - Medication Pending Delivery, Vitals were not recorded.
11/07/2023 8:11 PM, BP 89/61 - NPV, Medication

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should have been administered per parameters.
11/09/2023 8:31 PM - Medication Pending Delivery, Vitals were not recorded.
11/10/2023 8:09 AM - NPV, Vitals were not recorded.
11/11/2023 8:44 AM - NPV, Vitals were not recorded.
11/12/2023 8:06 PM - NPV, Vitals were not recorded.

On 11/13/2023, at approximately 1:45 PM, Surveyor reviewed Resident 14's medications in the med cart with Med Passer R and observed the following:
Surveyor was unable to locate the 8:00 PM blister pack of Midodrine. Surveyor asked Med Passer R if s/he knew where the medication was. Med Passer R stated s/he did not administer evening medications and looked through the med cart but was unable to locate the medication. Health Coordinator M and House Manager Q looked through the two med carts available to the med passers and looked through a med cart in the office that housed overflow medications.
Surveyor was given a bottle of Midodrine and was informed that the 8:00 PM medications were dispensed from this bottle. Surveyor reviewed the bottle and stated that the medication had expired on 09/11/2023. Surveyor asked Med Passer R if medications were dispensed out of the blister packs based on the day of the month which s/he confirmed.

On 11/13/2023, at approximately 2:00 PM, Surveyor reviewed Resident 14's Midodrine 8:00 AM and 2:00 PM blister packs. Surveyor determined that the dispensed medications did not correlate with Resident 14's 2023 November MAR. For example: 8:00 AM blister pack, week of 11/05 to 11/11, had medications dispensed on

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11/09 and 11/10. The MAR documented that no meds were administered that week at 8:00 AM due to "NPV."

On 11/13/2023 at 3:45 PM, Surveyors interviewed Administrator L, Health Coordinator M and House Manager Q. Administrator L stated s/he would review Resident 14's medications with staff and ensure staff know how to read BPs.

Surveyor noted that based on Resident 14's 2023 October and November MAR, s/he received expired medications 15 times if dispensed from the provided bottle.

Example 3: Resident 15

On 11/13/2023, at approximately 9:35 AM, Surveyor interviewed Resident 15. Resident 15 commented that his/her blood sugar (BS) levels "were all over the board, up over 300."

Resident 15 admitted to the facility, 09/12/2023, with diagnoses including Type 2 diabetes, hypertension, heart failure and pain.

Resident 15's ISP, dated 02/10/2023, documented:
"Special Diet: Diabetic. [Resident 15] is on a recommended low carbohydrate diet per [his/her] physician. [Resident 15] is on an ordered Diabetic Diet - general low sugar and carbohydrates."
"Change Dexcom - Resident currently uses CGM (continuous glucose monitor) to monitor blood sugar levels. To have blood sugars within prescribed parameters."
Surveyor noted the ISP did not provide monitoring guidelines for Resident 15's blood glucose/BS levels and defined BS parameters; what BS level

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017756	A. BUILDING: _____ B. WING _____	R-C 11/13/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SV SOUTH BELOIT NORTH	2027 COLONY COURT BELOIT, WI 53511

(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 431	Continued From page 27 is considered high for Resident 15. Resident 15's October and November 2023 MAR, dated 10/01/2023 to 11/12/2023, documented 28 days of BS levels 300+ and 3 days 400+: 10/01: 374, 318; 10/04: 330, 326; 10/07: 400; 10/08: 339; 10/10: 346; 10/11: 330; 10/12: 313; 10/14: 398; 10/15: 325; 10/16: 342; 10/17: 316, 332; 10/18: 355, 366; 10/19: 310; 10/21: 387; 10/22: 359, 329; 10/23: 316, 343; 10/24: 336, 356; 10/25: 330, 369; 10/26: 332, 381, 338; 10/27: 306; 10/28: 317, 423, 339; 10/29: 310, 443, 355, 345; 10/30: 359, 350, 303; 10/31: 415; 11/01: 300, 351, 348; 11/02: 320, 341; 11/05: 395; 11/12: 343 Resident 15's "Observation" notes, dated 10/01/2023 to 11:13/2023, did not document any concerns with diet. On 11/13/2023 at 3:45 PM, Surveyors interviewed Administrator L, Health Coordinator M and House Manager Q. Administrator L stated s/he would contact Resident 15's physician and obtain his/her parameters and update the ISP and MAR accordingly. Administrator L acknowledged Resident 7's medical provider should have been contacted when reading were within notification parameters. Administrator L stated Resident 7's MAR was fixed to include notify house manager and s/he would notify the medical provider.	N 431		