STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0014663	A. BUILDING: _____ B. WING _____	R-C 12/10/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARE PARTNERS ASSISTED LIVING ANTIGO II	1415 10TH AVENUE ANTIGO, WI 54409

(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 000}	Initial Comments On 12/09/2025, Surveyor conducted a verification visit and complaint (x3) investigation at Care Partners Assisted Living II. Data collection continued through 12/10/2025. The deficiencies identified in statement of deficiency (SOD) M9WS12 were corrected. One of 3 complaints was substantiated. One deficiency was identified. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 15	{N 000}		
N 416	83.37(2)(e) Other administration given or delegated by RN Other administration. Injectables, nebulizers, stomal and enteral medications, and medications, treatments or preparations delivered vaginally or rectally shall be administered by a registered nurse or by a licensed practical nurse within the scope of their license. Medication administration described under sub. (2)(e) may be delegated to non-licensed employees pursuant to s. N 6.03(3). This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure medication delegation of injectables, nebulizer, stomal and enternal medications, treatments or preparations delivered vaginally or rectally for two caregivers reviewed, Caregiver B and Caregiver C. Findings include:	N 416		

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

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N 416	Continued From page 1	N 416		

Between 09/18/2025 and 10/10/2025, the Department received 3 complaints alleging resident care concerns (hygiene and skin breakdown), facility cleanliness and medication administration (insulin administration).

The facility is licensed to serve up to 16 residents in the client groups advanced aged, irreversible dementia/Alzheimer's and terminally ill.

On 12/09/2025, Surveyor reviewed Resident 1's record. Resident 1 was admitted on 05/01/2025. Resident 1 had the following diagnoses (but not limited too): Chronic airway obstruction, Diabetes with kidney complications, Heart failure. According to the medication administration record (MAR), Resident 1 was prescribed Lantus Solostar 100 units/ML [Inject 23 units under the skin daily with breakfast] and Insulin Aspart 100 unit/ML Pen [Sliding scale insulin before lunch and before dinner. 150-200 = 2U units, 201-250 = 6U, 251-300 = 8U, 301-350 = 10U, 351-400 = 12U, >400 Call MD on Call, Max Dose 24U]. Resident 1 discharged on 11/21/2025.

On 12/10/2025 at approximately 10:47 AM, Surveyor interviewed Caregiver D via telephone. Surveyor asked Caregiver D about resident care and medication administration. Caregiver D expressed a concern with insulin injections. Caregiver D reported, "Resident 1 wanted things a certain way." Caregiver D stated that staff would not give Resident 1 his/her insulin in the "spot" s/he wanted, which was in the back of his/her upper left arm. Caregiver D commented, "It's been awhile - Caregiver B put insulin in [Resident 1's] elbow."

On 12/10/2025 at approximately 12:33 PM, Surveyor interviewed Resident 1 via telephone.

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N 416	Continued From page 2 Surveyor asked Resident 1 about resident care, cleaning and medication administration when s/he had resided at the Provider's facility. Resident 1 reported, "I am doing a lot better in my new facility." Resident 1 stated that s/he had concerns about his/her safety at the Provider's facility. Resident 1 reported that Caregiver B injected insulin into his/her elbow a few weeks prior to Resident 1 moving out. Resident 1 stated, "I made a complaint to [Director A] and [Director A] told me [s/he] couldn't get rid of [Caregiver B] because [s/he] couldn't get anybody else." Resident 1 indicated that s/he wanted his insulin injected in the back of his/her upper left arm and Caregiver B had injected insulin in his/her left elbow. On 12/10/2025 at approximately 3:15 PM, Surveyor interviewed Director A via telephone. Surveyor asked Director A for Caregiver B's medication delegation/Resident Nurse (RN) delegation. Director A confirmed Caregiver B was a medication passer and had been administering insulin. Director A indicated that s/he was not sure if Caregiver B received medication/RN delegation from RN E. Director A informed Surveyor that Director A would look for medication/RN delegation for Caregiver B. On 12/10/2025 at approximately 3:21 PM, Surveyor interviewed Caregiver B via telephone. Caregiver B confirmed his/her start date of 09/05/2025. Caregiver B confirmed being a medication passer and that s/he administered insulin. Surveyor asked Caregiver B about medication administration and insulin injections. Caregiver B reported that Caregiver B would administer insulin the way the resident wanted it and that Caregiver B would follow the doctor order and the blood sugar sliding scale. Caregiver	N 416		

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N 416	Continued From page 3	N 416		

B stated, [Resident 1] had a problem with me giving [him/her] insulin. I am not sure if [s/he] filed a complaint. Surveyor asked Caregiver B about where Caregiver B administered Resident 1's insulin. Caregiver B reported, "I administered the insulin above [Resident 1's] elbow, back of [his/her] arm (and) Resident 1 complained about where I administered the insulin." Caregiver B commented that the insulin must have been administered to low on the back of Resident 1's arm (just above the elbow area). Surveyor asked Caregiver B if Caregiver B received medication/RN delegation since his/her start date. Caregiver B reported that s/he did not receive medication/RN delegation at the facility.

On 12/10/2025 at approximately 3:55 PM, Surveyor interviewed Caregiver C via telephone. Caregiver C confirmed his/her start date of 10/20/2025. Caregiver C confirmed that s/he passed medications on occasion and administered insulin on occasion. Surveyor asked Caregiver C if Caregiver C received medication/RN delegation since his/her start date. Caregiver C reported that s/he did not receive medication/RN delegation at the facility.

On 12/10/2025 at approximately 3:59 PM, Director A noted the following via e-mail in regards to Caregiver B's medication/RN delegation: "Hello. Unfortunately [s/he] is not delegated under RN E personally(,) but is medication trained on the registry."

On 12/10/2025 at approximately 4:30 PM, Surveyor interviewed Director A via telephone. Director A verified that Caregiver B and Caregiver C did not receive medication/RN delegation from RN E since starting at the facility. Director A commented that these caregivers would receive

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N 416	Continued From page 4 medication/RN delegation in the near future. Surveyor asked Director A about medication administration and Resident 1's insulin injections. Director A reported that s/he did not have any concerns with medication administration and that Caregiver B had administered Resident 1's insulin in the arm - above the elbow. The Provider did not ensure medication delegation for 2 of 2 caregivers reviewed.	N 416		