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	0013787	A. BUILDING: _____ B. WING _____	C 09/18/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
IVY MANOR OF WEST BEND	370 S FOREST AVE WEST BEND, WI 53095

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N 000	Initial Comments On 09/14/2023, with information gathered through 09/18/2023, Surveyor conducted an abbreviated licensure survey and a complaint investigation at Ivy Manor of West Bend. Four deficiencies were identified. Complaint was unsubstantiated. Census: 20	N 000		
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 observation, record review and interview, the provider did not ensure 1 out of 1 resident records reviewed were updated annually or when there was a change in condition. Resident 1's ISP did not document that s/he displayed dietary concerns, refused medication administration, and could be manipulative with as needed (PRN) pain medication after 30 days of	N 389		

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

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N 389	Continued From page 1	N 389		

observation since admittance.

Findings include:

On 09/14/2023, Surveyor reviewed Resident 1's record.

Resident 1 was admitted to the facility on 08/18/2022 with diagnoses including vascular dementia with behavioral disturbance, chronic obstructive pulmonary disease and cervical disc degeneration.

Resident 1's "Observations" documented:
"01/10/2023 - The following message faxed to [nurse practitioner]. Continued concerns regarding [Resident 1]. ... has lost weight. [His/her] recent weight loss is visually obvious. [Resident 1] weight 124 lbs on 01/01/2023, weighed 112 lbs today. ..."
"01/31/2023 - Resident stated that [s/he] wants a sharp knife saying [s/he] wants to slit [his/her] throat. Resident stated that [s/he] can't take this pain anymore. Resident was advised that [s/he] was giving an aspirin with the 20 mins (minutes) before [s/he] came out."
"02/02/2023 - Refuses scheduled neb (nebulizer) TX (treatment). Causes behaviors. ..."
"02/05/2023 - Resident came out and asked writer for a sharp knife so [s/he] could cut off [his/her] head because [s/he] was having a bad headache. Three PRN's were given at different times ..."
"02/06/2023 - Resident c/o (complained of) headache, said [s/he] wants a knife to "cut [his/her] head off," resident was given several PRN medications for headaches and pain throughout first shift such as aspirin, acetaminophen, ibuprofen, and sumatriptan."
"02/08/2023 - Been refusing scheduled Docusate

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N 389	Continued From page 2 Sod (sodium) ear drops since ordered along with scheduled neb TX and causes [his/her] increased anxiety when approaching to do TX ..." "02/12/2023 - Resident almost drunk up the whole gallon of milk on 02/11/2023. Today resident is doing the same thing. Resident is asking for milk like every 30 mins. ..." "02/16/2023 - ...weight has fluctuated 5-6 pounds monthly ..." "02/19/2023 - Asked for a lidocaine patch so I put one on the back of [his/her]neck. Then later I went to check on [him/her] and [s/he] had one on [his/her] forehead ... came to me around 4 PM saying [s/he] has a severe headache, [s/he] said [s/he] fell and now [s/he] needs to go to the hospital. There were no signs of falling ... believe this to be part of [Resident 1's] behaviors ..." "03/22/2023 - Around 1:40 PM [Resident 1] opened door and demanded 911 be called ...had morphine 51 min prior for complaints of a headache ..." "03/24/2023 - Resident was up every hour getting ice cream with milk" "04/07/2023 - Resident kept getting up asking for ice cream. Staff told resident at 3 AM that [s/he] had to wait until later today after [s/he] eats breakfast." "04/10/2023 - Resident is only requesting morphine now with ice cream and milk. [S/he] Is not willing to having any other meds, any water, nor is [s/he] willing to sleep." "04/11/2023 - Was just given PRN for a headache just rang again for another prn for headache" "05/12/2023 - After giving meds for sleep and headache and drinking milk and ice cream beforehand, [s/he] sat with me in the living room for 6 minutes to which [s/he] asked if [s/he] could have more medication for [his/her] headache because this was not working ..."	N 389		

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"05/24/2023 - has been getting worse and worse with the medication request, now its right after [s/he] gets meds [s/he] is right back out asking for more and is getting mad when we tell [him/her] [s/he] is maxed out ... continues to request Morphine on a regular basis, sometimes hourly. [His/her] pain meds have been increased with little to no effect on [his/her] requests for Morphine. It was determined this to be a anxious behavior ..."

Resident 1's "Individual Service Plan," undated, documented:
"Appetite Tracking: Resident requires staff to monitor food consumption. To consume adequate food/proper nutrition."
"Eating: Loves milk and ice cream. Independent with eating. Needs cueing."
"Medication Management: Unable to understand or consistently manage medication independently."
"Pain History and Management: Recent complaint of headache. General back pain and headaches. ... Monitor for changes and utilize PRNs. Requires narcotics frequently due to low pain tolerance."
"Memory and Alertness: Periods of confusion."

Surveyor noted the ISP did not document concerns and guidelines regarding Resident 1's refusal of medications, weight loss concerns or behaviors associated with the requesting of PRN pain medication.

On 09/14/2023, at approximately 1:00 PM, Surveyor interviewed Administrator A. Administrator A stated Resident 1 did go through periods of time where s/he would only eat one type of food item. Administrator A explained that Resident 1 had been known to request a pain

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N 389	Continued From page 4 medication for a headache and change his/her mind and state that his/her leg hurt; it would be difficult to determine if s/he was experiencing pain or if it was a behavior. Administrator A stated s/he understood that Resident 1's ISP should have documented details about these behaviors, as the ISP was to be individualized.	N 389		
N 404	83.37(1)(e) Medication regimen, administration review. Medication Regimen Review. 1. If residents ' medications are administered by a CBRF employee, the CBRF shall arrange for a pharmacist or a physician to review each resident ' s medication regimen. This review shall occur within 30 days before or 30 days after the resident ' s admission, whenever there is a significant change in medication, and at least every 12 months. 2. At least annually, the CBRF shall have a physician, pharmacist, or registered nurse conduct an on-site review of the CBRF ' s medication administration and medication storage systems. 3. The CBRF shall obtain a written report of findings under subds. 1. and 2., and address any irregularities for appropriate action. When the review is done by someone other than the prescribing practitioner, the prescribing practitioner shall receive a copy of the report when there are irregularities identified with the resident's medication regimen, which may need physician involvement to address. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure an onsite review of the CBRF's (Community-Based Residential Facility)	N 404		

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N 404	Continued From page 5 medication administration and medication storage systems were completed in 2021 and 2022 by a physician, pharmacist, or registered nurse (RN). Findings include: On 09/14/2023, at approximately 12:30 PM, Surveyor requested the provider's medication audits from Administrator A for 2021 and 2022. Administrator A stated there were no official forms that identified an audit had been completed; staff review the med carts weekly and "our registered nurse reviews" resident medications quarterly. There was no documentation to verify a medication regimen review was completed as required for 2021 and 2022.	N 404		
N 488	83.44(1)(c) Clothes dryers enclosed and vented Clothes dryers. The CBRF shall enclose any clothes dryer having a rated capacity of more than 37,000 Btu/hour in a one-hour fire resistive rated enclosure. If the clothes dryer requires a vent, the CBRF shall use dryer vent tubing that is of rigid material with a fire rating that exceeds the temperature rating of the dryer. The dryer vent tubing shall be clean and maintained. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure that the clothes dryer in the residential laundry room had vent tubing of rigid material, with a fire rating that exceeds the temperature rating of the dryer. The clothes dryer was observed to have the flexible foil type vent tubing. Findings include:	N 488		

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N 488	Continued From page 6 On 09/14/2023, at approximately 11:45 AM, during a tour of the facility, Surveyor observed a foil accordion style vent tubing from residential clothes dryer to vent duct. Administrator A verified the venting was not rigid as required and stated s/he would follow up with the maintenance staff.	N 488		
N 504	83.46(1)(c) Heating system maintenance. Heating. The CBRF shall maintain the heating system in a safe and properly functioning condition. The CBRF shall ensure that a heating contractor or local utility company completes all of the following maintenance and makes available to the facility documentation of the maintenance performed: 1. An oil furnace shall be serviced at least once each year. 2. A gas furnace shall be serviced at least once every 3 years. 3. The CBRF shall have a chimney inspected at intervals corresponding with the heating system service under subd. 1. or 2. This Rule is not met as evidenced by: Based on record review and interview, the provider did not have documentation indicating the gas furnace had been serviced at least every 3 calendar years. Findings include: On 09/14/2023, Surveyor reviewed facility life safety code documentation. Surveyor noted the provided furnace documentation was dated 07/25/2018 and	N 504		

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N 504	Continued From page 7 08/24/2023. Surveyor asked Administrator A if the furnace had been serviced in 2021. Administrator A stated Administrator B handled the furnace inspections. Surveyor spoke with Administrator B who stated s/he was unsure of where that documentation had been filed. Administrator B stated s/he understood the gas furnace were to be inspected every 3 years. As of 09/18/2023 at 4:00 PM, no further documentation was provided.	N 504		