STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015955	A. BUILDING: _____ B. WING _____	C 03/19/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WATERFORD AT COLBY (THE)	**1110 N DIVISION ST COLBY, WI 54421**

(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 03/12/2024, Surveyors conducted a complaint and self-report investigation at Waterford at Colby. Data collection continued through 03/19/2024. One deficiency was identified. The complaint was substantiated. The self-report was closed. Census: 42	N 000		
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 The CBRF shall develop and implement a policy for disposing unused, discontinued, outdated, or recalled medications in compliance with federal, state and local standards or laws.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 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.	N 406		

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

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N 406	Continued From page 1 This Rule is not met as evidenced by: Based on observation, interview, and record review, the provider did not ensure medications carts that had Schedule II medication in them were stored in a locked area and/or permanently affixed. Findings include: On 02/06/2024, the department received a complaint alleging a medication cart was stored in an employee bathroom. Pharmacy Newscapsule: Pharmacy Newscapsule - 2023 Quarter 1 (wisconsin.gov) page 4 of 4 outlined for facilities some frequently asked questions involving the security of drugs and Schedule II controlled drugs that are administered by staff. "The CBRF shall provide separately locked and securely fastened boxes, drawers, or permanently fixed compartments within the locked area for storage of Schedule II drugs... if the cart has Schedule II drugs in it and stored in the hall, the cabinet needs to have a separate lock and be permanently affixed. If the facility cannot affix the cart, they would need to request a waiver/variance and provide alternative means to show the cart cannot easily be removed from the building." On 03/12/2024 at 3:45 PM, Surveyor requested and received a copy of the provider's policy and procedure regarding "Storage of Medications," dated August 2017. In bold letters, it stated, "1. ...Both the medication carts and medication room should be locked when not in use." The provider has 2 large medication carts, one	N 406		

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N 406	Continued From page 2	N 406		

for the secured Magnolia Trail (MT) unit and the other for the general population.

On 03/12/2024 at 12:57 PM, Surveyor observed a medication cart stored in a bathroom on the MT unit. Surveyor interviewed Caregiver C. Caregiver C stated they had received new larger medication carts. Caregiver C stated the room was not used as a bathroom anymore because the medication cart needed to be stored behind a locked door. Caregiver C stated the plan was for the toilet to be pulled out. The bathroom next door was made into a unisex bathroom. Surveyor observed the mechanism on the door handle. The door could be opened with any thin flat tool and was not keyed or coded. The side of a key, an eating utensil, or a knife could pop the lock. Caregiver C indicated there were no controlled medications in the cart but there had been in the past.

Throughout the day of 03/12/2024, from 9:00 AM and 4:00 PM, Surveyors observed another medication cart stored by a railing separating the open dining area and the open TV area in the main living area at the center of the building. These areas were open but partially hidden by the kitchen and a floor to ceiling fireplace.

At 1:26 PM, Surveyor interviewed Caregiver D. Caregiver D stated the cart was kept in that location for the day and evening shift and put in the medication room at night. Caregiver D also indicated the cart on the MT unit was kept in the bathroom that is no longer used as a bathroom. Caregiver D indicated there were Schedule II medications in the cart.

On 03/12/2024 at 3:27 PM, Surveyor interviewed Associate Administrator (AA) A. AA A also stated the bathroom had not been used as a bathroom

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N 406	Continued From page 3 since the cart was stored in it. On 03/18/2024 at 1:48 PM, Surveyor interviewed AA A and Executive Director (ED) B. AA A and ED B indicated new carts had been bought but there was no room in the medication rooms for the carts and other additional equipment, and there was a plan to remodel the area in the MT unit. AA A and ED B stated they were unfamiliar with the regulation to permanently affix or put the cart behind locked doors when not in use. AA A and ED B stated a new lock would be put on the room on the MT unit and arrangements would be made to secure the other medication cart in a locked room.	N 406		