STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0010729	A. BUILDING: _____ B. WING _____	R 01/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SYLVAN CROSSINGS IN WESTSHIRE VILLAGE	5475 WESTSHIRE CIRCLE WAUNAKEE, WI 53597

(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 01/04/2024, Surveyor conducted a verification visit at Sylvan Crossings In Westshire Village. One deficiency was identified, this was a repeat violation from statement of deficiency (SOD) PG8312, dated 07/17/2023. One previous violation was substantially corrected. Under statutory provisions of Wis.Stat. ch. 50 a $200 revisit fee is being assessed. Census: 25	{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 ensure 1 of 1 resident reviewed received their medications as prescribed. Resident 1 did not receive his/her Novolog as prescribed 20 times from 11/01/2023 to 12/31/2023. This is a repeat deficiency. See Statement of Deficiency (SOD) EJ2L11, dated 03/02/2018, SOD 67T114, dated 03/04/2019, SOD 67T116, dated 01/22/2021, and SOD PG8312, dated 07/17/2023. Findings include:	{N 352}		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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{N 352}	Continued From page 1 On 01/04/2024 at approximately 10:10 a.m., Surveyor reviewed Resident 1's record. Resident 1 was admitted to the provider's facility on 11/23/2021 with diagnosis including diabetes. Resident 1's physician orders included Novolog flexpen 100 unit/ml 10 units three times daily, if blood sugar is less than 130, give 8 units as well as a sliding scale Novolog flexpen 100 unit/ml to give an additional 2 units for every 50 mg/dl over 150 for uncontrolled diabetes: 200-250, 2 extra units; 250-300, 2 extra units; 300-350, 6 extra units. Surveyor reviewed Resident 1's November and December 2023 medication administration record (MAR), which documented the following occurrences when Resident 1's Novolog was not administered as ordered: -11/02/2023 11:58 a.m. Blood Sugar 170 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -11/02/2023 4:36 p.m. Blood Sugar 228 - 4 additional units administered. *Per order, 2 additional units of insulin should have been administered. -11/03/2023 11:53 a.m. Blood Sugar 172 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -11/03/2023 4:51 p.m. Blood Sugar 183 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -11/04/2023 11:46 a.m. Blood Sugar 171 - 2 additional units administered. *Per order, no additional units of insulin should have been administered.	{N 352}		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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{N 352}	Continued From page 2 -11/05/2023 11:45 a.m. Blood Sugar 238 - 4 additional units administered. *Per order, 2 additional units of insulin should have been administered. -11/07/2023 11:47 a.m. Blood Sugar 170 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -11/07/2023 4:30 p.m. Blood Sugar 165 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -11/09/2023 4:31 a.m. Blood Sugar 197 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -11/10/2023 7:01 a.m. Blood Sugar 217 - 4 additional units administered. *Per order, 2 additional units of insulin should have been administered. -11/10/2023 11:49 a.m. Blood Sugar 218 - 4 additional units administered. *Per order, 2 additional units of insulin should have been administered. -11/10/2023 4:17 p.m. Blood Sugar 234 - 4 additional units administered. *Per order, 2 additional units of insulin should have been administered. -11/11/2023 11:56 a.m. Blood Sugar 174 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -11/11/2023 5:10 p.m. Blood Sugar 171 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -11/23/2023 6:49 a.m. Blood Sugar 184 - 2 additional units administered. *Per order, no additional units of insulin should have been administered.	{N 352}		

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{N 352}	Continued From page 3 -11/27/2023 6:53 a.m. Blood Sugar 227 - 4 additional units administered. *Per order, 2 additional units of insulin should have been administered. -11/27/2023 11:53 a.m. Blood Sugar 176 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -12/28/2023 6:56 a.m. Blood Sugar 234 - 4 additional units administered. *Per order, 2 additional units of insulin should have been administered. -12/28/2023 11:53 a.m. Blood Sugar 137 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. -12/29/2023 7:08 a.m. Blood Sugar 158 - 2 additional units administered. *Per order, no additional units of insulin should have been administered. From 11/01/2023 to 12/31/2023, Resident 1's Novolog was not administered as prescribed 20 times. At approximately 10:30 a.m., Surveyor reviewed Resident 1's MARs with Executive Vice Pres L and Res Care Director M. Executive Vice Pres L stated that s/he had identified that the insulin order was confusing so s/he has reached out to the physician to get it clarified and they are waiting to hear back.	{N 352}		