

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0017372	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 01/07/2025
NAME OF PROVIDER OR SUPPLIER BRIGHTSTAR SENIOR LIVING OF WAUNAKEE		STREET ADDRESS, CITY, STATE, ZIP CODE 1001 QUINN DR 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 01/07/2025, with information obtained through 01/09/2025, the Bureau of Assisted Living, Southern Regional Office, conducted a verification visit at Brightstar Senior Living of Waunakee, a community-based residential facility (CBRF) located in Waunakee, WI. As a result of the survey, 1 deficiency was identified. The deficiency was a repeat deficiency. See Statement of Deficiency (SOD) PI0513, dated 07/26/2024, and SOD PI0512, dated 02/28/2024. Under statutory provisions of Wis. Stat. Chapter 50, a \$200 revisit fee is being assessed. Census: 17	N 000		
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	N 431		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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N 431	Continued From page 1 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. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that Resident 8's health was monitored in accordance with his/her medical provider's orders. Of 4 occasions from 12/01/2024 - 01/06/2025 in which Resident 8's weight gain fell within his/her medical provider notification parameters, his/her medical provider was notified on 0 occasions. On 1 occasion, from 12/29/2024 - 12/31/2024, where Resident 8 was documented as experiencing a 24 lb weight loss followed by 24 lb weight gain, no follow up actions were taken to further assess the occurrence. This is a repeat deficiency. See Statement of Deficiency (SOD) PI0513, dated 07/26/2024, and SOD PI0512, dated 02/28/2024. Findings include: On 01/07/2025, Surveyor reviewed Resident 8's	N 431		

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N 431	Continued From page 2 record. Resident 8 was admitted to the provider on 09/16/2024 with diagnoses including dementia, congestive heart failure, and localized edema. Surveyor reviewed medical provider orders for Resident 8, which included the following order, dated 09/18/2024: "...Daily weights - update cardiology clinic if weight gain of 3 or more lbs in a day or 5 or more lbs in a week. If gain more weight than this and feel short of breath, fatigued, or have chest pain, seek medical attention immediately..." Surveyor reviewed Resident 8's medication administration records (MARs) from 12/01/2024 - 01/06/2025, where staff appeared to track Resident 8's daily weights. The instructions included in the daily weight entry documented, "Take residents weight each morning before breakfast with same amount of clothing daily. Let [Nurse D], [registered nurse] know if weight is up 3 pounds in a day for [sic] 5 pounds in a week." In reviewing Resident 8's weights, Surveyor observed the following 4 occasions in which Resident 8 was documented as gaining more than 3 pounds in 1 day: - Weight on 12/03/2024 (10:39 a.m.) = 150 lbs; weight on 12/04/2024 (8:20 a.m.) = 155 lbs (gain of 5 pounds) - Weight on 12/13/2024 (7:56 a.m.) = 148 lbs; weight on 12/14/2024 (8:26 a.m.) = 156 lbs (gain of 8 pounds) - Weight on 12/24/2024 (8:26 a.m.): = 145 lbs; weight on 12/25/2024 (8:23 a.m.) = 151 lbs (gain of 6 pounds) - Weight on 01/04/2025 (8:00 a.m.): = 147.8 lbs; weight on 01/05/2025 (9:30 a.m.) = 154.5 lbs (gain of 6.7 lbs) Surveyor also observed an occasion of	N 431		

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N 431	Continued From page 3 substantial documented weight loss and gain, as documented by the following: - Weight on 12/29/2024 (7:06 a.m.): = 148 lbs; weight on 12/30/2024 (8:17 a.m.) = 124 lbs (loss of 24 lbs); weight on 12/31/2024 (7:42 a.m.) = 148 lbs (gain of 24 lbs) No annotations were documented in any of the above entries of any follow up monitoring, medical provider communication, or actions taken as a result of Resident 8's weight gains. Surveyor reviewed Resident 8's observation notes from 12/01/2024 - 01/07/2025 but did not see any information regarding the above documented occurrences of weight gain within his/her medical provider notification parameters. At approximately 12:13 p.m., Surveyor interviewed Administrator A about the above weight gain occasions. Administrator A reported s/he would have to follow up with Nurse D for additional information and that Nurse D was out sick. At approximately 4:52 p.m., Surveyor reviewed an e-mail sent by Administrator A, which confirmed that Nurse D did not contact Resident 8's medical provider on the above occasions. Administrator A reported that the above occurrence of Resident 8's 24 lb weight gain and loss, documented from 12/29/2024 - 12/31/2024, was due to the weight being typed incorrectly and not corrected with no additional follow up weight taken for correction. On 01/08/2025, at approximately 9:52 a.m., Surveyor interviewed Administrator A again. Administrator A confirmed that staff were expected to notify the provider's nurse with weight	N 431		

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N 431	Continued From page 4 gains within notification parameters and then the nurse was expected to notify residents' medical providers. Administrator A reported s/he was not sure where the breakdown in this happened for Resident 8's occurrences of weight gains but that staff would continue to be educated on the process.	N 431		