STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0017289	A. BUILDING: _____ B. WING _____	C 12/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAK PARK PLACE OF NAKOMA	4327 NAKOMA RD MADISON, WI 53711

(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 12/09/2024, Surveyors conducted a complaint investigation at Oak Park Place of Nakoma. Three (3) deficiencies were identified. The complaint was substantiated. Census: 22	N 000		
N 432	83.38(1)(h) Medication administration. 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: Medication administration. The CBRF shall provide medication administration appropriate to the resident ' s needs. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 residents were provided medication administration appropriate to their needs. Resident 1's prednisone was unavailable to him/her. This is a repeat deficiency. See Statement of Deficiency (SOD) 2HW013, dated 11/22/2022; SOD 2HW014, dated 05/16/2023; and SOD 2HW015, dated 10/13/2023. Findings include: On 12/09/2024, Surveyors conducted a complaint	N 432		

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

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N 432	Continued From page 1 investigation. As part of the investigation, Surveyor reviewed the record of Resident 1. Resident 1 was admitted to the provider on 08/13/2019 with diagnoses including diabetes, schizophrenia, heart disease, and aftercare following organ transplant. Surveyor reviewed a Resident 1's medication administration records (MAR) which included a physician order prednisone tablet 5 mg to give 1 tablet in the morning for organ transplant rejection/prophylaxis with a start date of 08/14/2019. Surveyor observed documentation of "not in med cart" when documenting for Resident 1's prednisone for October, November and December 2024. At 11:32 p.m. Surveyor noted that most staff were documenting that Resident 1's prednisone was not available for administration, but some staff were documenting that it was administered as ordered. Nurse B stated that s/he confirmed that the medication was not in the building and that s/he had contacted the pharmacy who stated Resident 1's prednisone has not been refilled since September. Surveyor asked if there was a reason for that. Nurse B stated not that s/he was aware of. Admin A stated the Resident 1's prednisone was being ordered now.	N 432		
N 481	83.43(1) Environment safe, clean, and comfortable Environment. The CBRF shall provide a living environment that is safe, clean, comfortable, and homelike. All common dining and living areas shall contain furnishings appropriate to the intended use of the room.	N 481		

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N 481	Continued From page 2	N 481		

This Rule is not met as evidenced by:
Based on observation and interview, the provider did not ensure a safe, clean, comfortable and homelike environment was provided.

Findings include:

On 12/09/2024, at approximately 9:10 a.m., Surveyor toured the provider's facility and identified the following concerns:
- Resident 2's room had paper, tissue and debris on the floor.
-Used gloved were tucked into the railing outside of room 122.
-Resident 4's bedroom had a heavy smell of bowel movement.
-Resident 5's room had paper, tissue and debris on the floor.
-Resident 6's room had laundry hanging on every door handle, closet knob and towel rack. Debris was on the floor. Dirty dishes were on the counter and in the sink.
-Resident 7's room had debris on the floor and brown splattering on the wall between the end of the bed and the closet.
-There was debris on the floor in the hallways and on the floor of the "expressions room".
-Resident 8 had laundry piled up in his/her laundry hamper. Surveyor asked Resident 8 when his/her laundry day was. S/he stated s/he does not know but would like to. Resident 8 stated that his/her laundry only gets done when s/he asks the staff to do the laundry, that s/he was told s/he would get an assigned laundry day, but so far that has not happened.
-Resident 10's bedroom door had brown splatter and drippings on the outside of it.
-Surveyor observed a caregiver assist Resident 1

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N 481	Continued From page 3 to the hallway after breakfast. Resident 1 had crumbs on his/her lab and dried on layers of food debris on his/her wheelchair. There was left over food debris on his/her face. Surveyor asked Resident 1 if s/he could observe his/her room. Resident 1's room had gouges out of the drywall on the walls from his/her wheelchair, several red and brown markings and debris on the carpet and brown splatters on the bathroom floor and walls near the toilet. Surveyor asked Resident 1 if the staff assist Resident 1 in cleaning his/her apartment. Resident 1 stated yes, but not often. -Resident 9's room had debris on the floor. -3rd floor stairwell window had 16 dead flies, 6 living flies, 9 boxelder bugs and 5 lady bugs. -2nd floor stairwell had 13 boxelder bugs in the windowsill and 12 dead bugs on the ground. -1st floor stairwell had 12 boxelder bugs, 1 lady bug, and 5 dead bugs on the ground. On 12/09/2024, at approximately 11:30 a.m., Surveyor reviewed the above concerns with Admin A and Nurse B. Admin A stated s/he understood the concern and would put a plan in place to address the concerns.	N 481		
N 499	83.45(3) Toxic substances. Toxic substances. The CBRF shall ensure that cleaning compounds, polishes, insecticides and toxic substances are labeled and stored in a secure area. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure all cleaning compounds and toxic substances were stored in a secure area. Surveyor observed cleaning compounds and	N 499		

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N 499	Continued From page 4 toxic substances in resident bedrooms in assisted living and memory care. Findings include: The provider is licensed as a class CNA (non-ambulatory) CBRF (community-based residential facility) able to serve up to 45 residents within the client groups of: advanced age, irreversible dementia/Alzheimer's, and terminally ill. On 12/09/2024, at approximately 9:10 a.m., Surveyor toured the provider's facility and identified the following concerns: -Resident 1's bathroom had a bottle of Windex on the counter next to a bottle of soap and open tube of toothpaste. -Resident 3's bathroom had a bottle of Clorox bleach and glass cleaner on the floor next to the toilet. -Resident 8's bathroom counter had Microban sanitizing spray, a bottle of rubbing alcohol and a bottle of Clorox bleach. On 12/09/2024, at approximately 11:30 a.m., Surveyor reviewed the above concerns with Admin A and Nurse B. Admin A stated s/he knows all cleaning compounds should be secured and would put a plan in place to address the concern.	N 499		