STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020468	A. BUILDING: _____ B. WING _____	C 03/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ADAVA CARE OF GLENDALE II	7335 N PORT WASHINGTON ROAD BAYSIDE, WI 53217

(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 03/18/2025 with information gathered through 03/19/2025, Surveyor conducted a complaint investigation, at Adava Care of Glendale II, a Community-Based Residential Facility (CBRF) in Glendale, WI. Five deficiencies were identified. Complaint substantiated. Census: 14	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 residents received all prescribed medications in the dosage and at intervals prescribed by a practitioner for 2 of 2 residents (Resident 1 and Resident 2) reviewed. Resident 1 had a total of 223 medications not administered between 01/01/2025 and 03/18/2025. Resident 2 had a total of 220 medications not administered between 01/01/2025 and 03/18/2025. Findings include: Example 1-Resident 1	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 03/18/2025, Surveyors reviewed Resident 1's record and identified the following: -Resident 1 was admitted to the provider's home on 07/14/2023. Resident 1 had diagnoses including hypertensive heart disease without heart failure, major depressive disorder, recurrent, recurrent hypersomnia, hyperlipidemia, vitamin d deficiency, anemia, Barrett esophagus without dysphasia, legal blindness and transient cerebral ischemic attack. Resident 1 needed assistance with medication administration from staff. Resident 1's January 2025 MAR had chart code "!", not in medication cart, entries on the following dates: -Aripiprazole 2 mg tablet on 01/15/2025-01/17/2025, 01/24/2025-01/26/2025 and 01/28/2025 at 8:00 PM (7 entries). -Baclofen 10 mg take 1/2 tablet (5 mg) on 01/28/2025-01/29/2025 at 8:00 AM (2 entries). -Baclofen 10 mg take 1/2 tablet (5 mg) on 01/28/2025-01/29/2025 at 4:00 PM (2 entries). -Baclofen 10 mg tablet on 01/28/2025 at 8:00 PM (1 entry). -Celecoxib 100 mg capsule on 01/28/2025-01/29/2025 at 8:00 AM (2 entries). -Duloxetine HCL 60 mg capsule on 01/28/2025-01/29/2025 at 8:00 AM (2 entries). -Famotidine 40 mg tablet on 01/28/2025-01/29/2025 at 12:00 PM (2 entries). -Famotidine 40 mg tablet on 01/28/2025 at 8:00 PM (1 entry). -Ferrous Sulfate 325 mg (65 mg iron) tablet on 01/28/2025-01/29/2025 at 8:00 AM (2 entries). -Folic Acid 1 mg tablet on 01/28/2025-01/29/2025 at 8:00 AM (2 entries). -Furosemide 20 mg tablet on	N 352		

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N 352	Continued From page 2	N 352		

01/28/2025-01/29/2025 at 8:00 AM (2 entries).
-Oxycodone HCL 5 mg tablet on 01/31/2025 at 6:00 AM (1 entry).
-Oxycodone HCL 5 mg tablet on 01/30/2025-01/31/2025 at 5:00 PM (2 entries).
-Oxycodone HCL 5 mg tablet on 01/30/2025-01/31/2025 at 8:00 PM (2 entries).
-Potassium chloride 10 MEQ tablet on 01/28/2025-01/29/2025 at 8:00 AM (2 entries).
-Quetiapine Fumarate 200 mg tablet on 01/28/2025 at 8:00 PM (1 entry).
-Rosuvastin calcium 10 mg tablet on 01/28/2025 at 8:00 PM (1 entry).
-Trazodone HCL 100 mg tablet on 01/28/2025 at 8:00 PM (1 entry).
-Vitamin A 10,000 unit capsule on 01/28/2025-01/29/2025 at 8:00 AM (2 entries).
-Vitamin B-1 100 mg tablet on 01/28/2025-01/29/2025 at 8:00 AM (2 entries).
-Vitamin D3 50 MCG 2,000 unit tablet on 01/28/2025-01/29/2025 at 8:00 AM (2 entries).
-Xarelto 20 mg tablet on 01/28/2025-01/29/2025 at 4:00 PM (2 entries).

Resident 1's February 2025 MAR had chart code "!", not in medication cart, entries on the following dates:

-Aripiprazole 2 mg tablet on 02/10/2025-02/16/2025, 02/18/2025-02/24/2025 and 02/26/2025-02/28/2025 at 8:00 PM (17 entries).
-Duloxetine HCL 60 mg capsule on 02/11/2025-02/17/2025 and 02/19/2025-02/28/2025 at 8:00 AM (17 entries).
-Gabapentin 400 mg capsule on 02/11/2025-02/28/2025 at 8:00 AM (18 entries).
-Gabapentin 400 mg capsule on 02/11/2025-02/28/2025 at 4:00 PM (18 entries).
-Gabapentin 400 mg capsule on

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N 352	Continued From page 3 02/10/2025-02/24/2025, 02/26/2025-02/28/2025 at 8:00 PM (3 entries). -Potassium chloride 10 MEQ tablet on 02/13/2025 at 8:00 AM (1 entry). -Trazodone HCL 100 mg tablet on 02/10/2025-02/24/2025, 02/26/2025-02/28/2025 at 8:00 PM (18 entries). Resident 1's March 2025 MAR had chart code "!", not in medication cart, entries on the following dates: -Aripiprazole 2 mg tablet on 03/01/2025-03/17/2025 at 8:00 PM (17 entries). -Duloxetine HCL 60 mg capsule on 03/01/2025-03/06/2025, 03/08/2025-03/18/2025 at 8:00 AM (17 entries). -Gabapentin 400 mg capsule on 03/01/2025-03/18/2025 at 8:00 AM (18 entries). -Gabapentin 400 mg capsule on 03/01/2025-03/17/2025 at 4:00 PM (17 entries). -Gabapentin 400 mg capsule on 03/01/2025-03/17/2025 at 8:00 PM (17 entries). -Trazodone HCL 100 mg tablet on 03/01/2025-03/17/2025 at 8:00 PM (17 entries). -Vitamin A 10,000 unit capsule on 03/11/2025-03/12/2025 at 8:00 AM (2 entries). Example 2-Resident 2 On 03/18/2025, Surveyors reviewed Resident 2's record and identified the following: -Resident 2 was admitted to the provider's home on 09/26/2023. Resident 2 had diagnoses including acute on chronic right heart failure, chronic obstructive pulmonary disease and type 2 diabetes mellitus. Resident 2 needed assistance with medication administration from staff.	N 352		

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N 352	Continued From page 4 Resident 2's January 2025 MAR had chart code "!", not in medication cart, entries on the following dates: -Albuterol 0.083% 2.5 mg/3 ML on 01/06/2025 and 01/09/2025 at 8:00 AM (2 entries). -Albuterol 0.083% 2.5 mg/3 ML on 01/03/2025 and 01/05/2025-01/09/2025 at 12:00 PM (6 entries). -Albuterol 0.083% 2.5 mg/3 ML on 01/03/2025-01/09/2025 at 4:00 PM (7 entries). -Albuterol 0.083% 2.5 mg/3 ML on 01/04/2025-01/08/2025 at 8:00 PM (5 entries). -Aquaphor with natural healing 41 % ointment on 01/19/2025-01/20/2025 and 01/27/2025-01/30/2025 at 8:00 AM (6 entries). -Baza protect cream apply topically on 01/19/2025-01/20/2025 and 01/29/2025-01/30/2025 at 8:00 AM (4 entries). -Baza protect cream apply topically on 01/05/2025 and 01/07/2025-01/08/2025 at 4:00 PM (3 entries). -Exemestane 25 mg tablet on 01/05/2025 and 01/30/2025 at 8:00 AM (2 entries). Resident 2's February 2025 MAR had chart code "!", not in medication cart, entries on the following dates: -Albuterol 0.083% 2.5 mg/3 ML on 02/10/2025 at 8:00 PM (1 entry). -Ammonium lactate 12 % lotion apply on 02/02/2025-02/03/2025, 02/05/2025-02/06/2025 and 02/08/2025 at 8:00 AM (5 entries). -Ammonium lactate 12 % lotion apply on 02/10/2025-02/11/2025, 02/15/2025-02/17/2025 and 02/24/2025-02/25/2025 at 8:00 PM (7 entries). -Aquaphor with natural healing 41 % ointment apply on 02/02/2025 at 8:00 AM (1 entry).	N 352		

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N 352	Continued From page 5 -Aquaphor with natural healing 41 % ointment apply on 02/07/2025-02/09/2025, 02/12/2025-02/14/2025, 02/18/2025-02/19/2025 and 02/21/2025-02/28/2025 at 8:00 PM (16 entries). -Baza protect cream apply topically on 02/02/2025, 02/08/2025-02/10/2025, 02/14/2025-02/17/2025, 02/22/2025-02/24/2025 and 02/28/2025 at 8:00 AM (12 entries). -Baza protect cream apply topically on 02/11/2025, 02/13/2025-02/19/2025 and 02/21/2025-02/28/2025 at 4:00 PM (16 entries). -Baza protect cream apply topically on 02/07/2025-02/09/2025, 02/11/2025-02/19/2025 and 02/21/2025-02/28/2025 at 8:00 PM (20 entries). -Incruse ellipta 62.5 MCG inhale on 02/10/2025-02/11/2025 at 8:00 AM (2 entries). -Pantoprazole sodium 20 mg tablet on 02/07/2025 and 02/13/2025 at 8:00 AM (2 entries). -Restasis 0.05 droperette instill 1 drop on 02/09/2025-02/12/2025 and 02/28/2025 at 8:00 AM (5 entries). -Restasis 0.05 droperette instill 1 drop on 02/09/2025-02/10/2025, 02/12/2025 and 02/28/2025 at 8:00 PM (4 entries). Resident 2's March 2025 MAR had chart code "!", not in medication cart, entries on the following dates: -Albuterol 0.083% 2.5 mg/3 ML on 03/03/2025-03/06/2025 at 8:00 AM (4 entries). -Albuterol 0.083% 2.5 mg/3 ML on 03/03/2025-03/06/2025 at 12:00 PM (4 entries). -Albuterol 0.083% 2.5 mg/3 ML on 03/03/2025-03/06/2025 at 4:00 PM (4 entries). -Albuterol 0.083% 2.5 mg/3 ML on 03/03/2025-03/06/2025 at 8:00 PM (4 entries).	N 352		

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N 352	Continued From page 6 -Ammonium lactate 12 % lotion apply on 03/16/2025 at 8:00 AM (1 entry). -Ammonium lactate 12 % lotion apply on 03/01/2025-03/03/2025 at 8:00 PM (3 entries). -Aquaphor with natural healing 41 % ointment on 03/10/2025-03/12/2025, 03/14/2025 and 03/16/2025-03/18/2025 at 8:00 AM (7 entries). -Aquaphor with natural healing 41 % ointment on 03/01/2025-03/05/2025 and 03/07/2025-03/17/2025 at 8:00 PM (16 entries). -Baza protect cream on 03/03/2025, 03/05/2025-03/06/2025, 03/10/2025, 03/14/2025 and 03/16/2025-03/17/2025 at 8:00 AM (7 entries). -Baza protect cream on 03/01/2025-03/17/2025 at 4:00 PM (17 entries). -Baza protect cream on 03/01/2025-03/17/2025 at 8:00 PM (17 entries). -Restasis 0.05 droperette instill on 03/03/2025-03/06/2025 at 8:00 AM (4 entries). -Restasis 0.05 droperette instill on 03/01/2025-03/06/2025 at 8:00 PM (6 entries). On 03/18/2025 at approximately 2:53 PM, Surveyors interviewed Administrator A. Administrator A confirmed chart "!" indicates medication was not in medication cart. Administrator A stated s/he is waiting on Resident 1's and Resident 2's doctors to refill residents medication. Administrator A stated s/he contacted the pharmacy and was told that they are waiting on Resident 1's and Resident 2's medications to be refilled by doctor in order to fill medications.	N 352		
N 381	83.35(1)(a) Pre-admission and ongoing assessments. Scope. The CBRF shall assess each resident ' s needs, abilities, and physical and mental	N 381		

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 381	Continued From page 7 condition before admitting the person to the CBRF, when there is a change in needs, abilities or condition, and at least annually. The assessment shall include all areas listed under par. (c). This requirement includes individuals receiving respite care in the CBRF. For emergency admissions the CBRF shall conduct the assessment within 5 days after admission. This Rule is not met as evidenced by: Based on record review and interview, the provider did not assess 1 of 1 resident (Resident 1) reviewed when s/he had a change in his/her needs, abilities, and/or physical and mental condition. Resident 1 did not have an assessment completed after 2 suicide attempts. Findings include: On 03/18/2025, Surveyors reviewed Resident 1's record and identified the following: -Resident 1 was admitted to the provider's home on 07/14/2023. Resident 1 had diagnoses including hypertensive heart disease without heart failure, major depressive disorder, recurrent, recurrent hypersomnia, hyperlipidemia, vitamin d deficiency, anemia, barrett esophagus without dysphasia, legal blindness and transient cerebral ischemic attack. -Resident 1 incident report, dated 12/31/2024, stated the following: "[Resident 1] was found with [his/her] TV cords and other cords around [his/her] upper body.	N 381		

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N 381	Continued From page 8 When [Resident 1] was asked if [s/he] was okay [Resident 1] stated that the lady next-door is using [his/her] electricity and [his/her] bill is too high so [s/he] pulled everything out and [Resident 1] TV was on the floor beside [his/her] recliner." -Resident 1 incident report, dated 02/02/2025, stated the following: "[Resident 1] pendent went off staff [sic] to room to find [Resident 1] is holding pendent and other necklaces and stuff around [his/her] neck saying "I should kill myself." Staff took items off resident neck." Resident 1's most recent assessment was dated, 08/16/2024. Resident 1's record did not contain any evidence of assessments completed for Resident 1 after either of the 2 suicide attempts. On 03/18/2025 at approximately 2:13 PM, Surveyors interviewed Administrator A. Administrator A confirmed the most recent assessment for Resident 1 was 08/16/2024. Administrator A stated a new assessment was not completed after Resident 1 incidents. Administrator A stated s/he did not think to complete a new assessment after either of the suicide attempts.	N 381		
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	N 389		

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N 389	Continued From page 9 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 record review and interview, the provider did not ensure 1 of 1 resident (Resident 1) had his/her individual service plan (ISP) updated when there was a change in condition. Resident 1 was admitted to the hospital on 01/18/2025 and was discharged on 01/24/2025. Resident 1's ISP, dated 08/16/2024, was not updated to identify new interventions after hospital stay. Findings include: On 03/18/2025, Surveyors reviewed Resident 1's record and identified the following: -Resident 1 was admitted to the provider's home on 07/14/2023. Resident 1 had diagnoses including hypertensive heart disease without heart failure, major depressive disorder, recurrent, recurrent hypersomnia, hyperlipidemia, vitamin d deficiency, anemia, Barrett esophagus without dysphasia, legal blindness and transient cerebral ischemic attack. Resident 1's Rogers Behavioral Health discharged summary, dated 01/24/2025, stated the following: -Resident 1 was admitted on 01/18/2025.	N 389		

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N 389	Continued From page 10 -"Plan for Making Environment Safer at Home: Safety Plan for Restricting Lethal means increase supervision to monitor for safety and promote healthy coping skills to use when [Resident 1] notices feelings of anger/sadness/anxiety/negative thoughts. Lock up all medications, weapons, sharps, and chemicals in support of [Resident 1's] safety and stabilization. When in serious trouble talk to an individual that can help consider next steps, reach out to a Therapist or professional resource in order to determine next steps if there are immediate safety concerns, talk through ways to safely work through the situation, follow safety plan or distress protocol. Professional resources Therapist or therapist on-call at agency, 911, Emergency Room, Rogers Behavioral Health Admissions, Crisis hotline, text crisis hotline, National hotline. Maintain good structure in your day. Practice good nightly sleep regime. Maintain daily physical exercise plan. Maintain healthy eating plan. Schedule in special enjoyable self-care activities each week. Review group materials learned. Professional resources." -Resident 1's ISP, dated 08/16/2024, was not updated to identify new interventions after hospital stay. On 03/18/2025 at approximately 2:13 PM, Surveyors interviewed Administrator A. Administrator A confirmed the most recent ISP for Resident 1 was 08/16/2024. Administrator A stated s/he was responsible for ISP updates. Administrator A stated Resident 1's ISP was not updated to identify new interventions after hospital stay.	N 389		

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N 419	Continued From page 11	N 419		
N 419	83.37(3)(c) Medication storage: locked cabinet. Administered by facility. The CBRF shall keep medicine cabinets locked and the key available only to personnel identified by the CBRF. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure 1 of 1 resident (Resident 2) medication was securely stored in his/her room. The provider also did not ensure medications administered by the facility were kept locked for 1 of 1 storage area. Findings include: The provider is licensed as a Class CNA (non-ambulatory) facility for 20 residents with programs in physically disabled, developmentally disabled, traumatic brain injury, terminally ill, advanced aged, and irreversible dementia/Alzheimer's. On the day of survey, the census was 14. On 03/18/2025 at approximately 11:00 AM, Surveyors arrived to the facility. The facility front entrance door was open so surveyors were able to walk straight in facility. Surveyors observed the medication cart unlocked with keys in cart and unattended from 11:00 AM - 11:10 AM. On 03/18/2025 at approximately 11:14 AM, Surveyors observed a bottle of acetaminophen 500 milligram (7 pills) sitting on top of the medication cart. The bottle had a sticky note attached stating the following: "This belong to [Resident 3]." On 03/18/2025 at approximately 11:15 AM, Surveyors interviewed Medication Tech B.	N 419		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020468	A. BUILDING: _____ B. WING _____	C 03/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ADAVA CARE OF GLENDALE II	7335 N PORT WASHINGTON ROAD BAYSIDE, WI 53217

(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 419	Continued From page 12 Medication Tech B stated s/he was the medication passer for the building during the survey. Medication Tech B stated s/he was outside. Medication Tech B stated the bottle of acetaminophen had been sitting on top of the medication cart since the start of his/her shift at 6:00 AM. Medication Tech B stated s/he did not know why the bottle of acetaminophen was on top of the medication cart. On 03/18/2025 at approximately 11:54 AM, Surveyors observed over the counter eye drops in Resident 2's room at bedside. Resident 2 stated s/he needed the eye drops for his/her eyes when s/he first wakes up to see. On 03/18/2025 at approximately 2:13 PM, Surveyors interviewed Administrator A. Administrator A stated the medication cart should have been locked at all times. Administrator A stated s/he was aware that Resident 2 had eye drops at bedside. Administrator A stated Resident 2's family brings him/her eye drops.	N 419		
N 427	83.38(1)(c) Leisure time activities. 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: Leisure time activities. The CBRF shall provide a daily activity program to meet the interests and capabilities of the residents. Employees shall encourage and promote resident participation in the activity program. The CBRF shall develop and post the activity schedule in an area available	N 427		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020468	A. BUILDING: _____ B. WING _____	C 03/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ADAVA CARE OF GLENDALE II	7335 N PORT WASHINGTON ROAD BAYSIDE, WI 53217

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N 427	Continued From page 13 to residents. This Rule is not met as evidenced by: Based on observation and interview, the provider did not provide a daily activity program to meet the interests and capabilities for 14 of 14 residents Findings include: On 03/18/2025 at approximately 11:00 AM until 3:00 PM, Surveyors were on-site and did not observe any activities. Surveyors observed residents laying in their bedroom and sitting in the living room in front of the TV during the duration of the survey. On 03/18/2025 at approximately 11:54 AM, Surveyors interviewed Resident 2. Resident 2 stated that there are no activities being done at the facility. On 03/18/2025 at approximately 2:53 PM, Surveyors interviewed Administrator A. Administrator A stated there was an activity calendar and s/he will send it via email by 5:00 PM on 03/18/2025. Administrator A stated Enrichment Director C conducts the activities with the residents. Administrator A stated that activities are not done daily at facility due to Enrichment Director C only working part-time. On 03/18/2025 at 9:01 PM, Surveyors received the facility activity calendar via email from Administrator A. Per the activity calendar the following activities were supposed to be conducted:	N 427		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0020468	A. BUILDING: _____ B. WING _____	C 03/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ADAVA CARE OF GLENDALE II	**7335 N PORT WASHINGTON ROAD BAYSIDE, WI 53217**

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N 427	Continued From page 14 -Morning: Morning Exercise -Afternoon: Where Am I?	N 427		