STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018450	A. BUILDING: _____ B. WING _____	C 05/01/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EMERALD RIDGE OF NEENAH	130 BYRD AVE NEENAH, WI 54956

(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
U 000	INITIAL COMMENTS From 04/24/2024 to 05/01/2024, Surveyor conducted 3 complaint investigations and a standard survey at Emerald Ridge of Neenah, a RCAC in Neenah. Three deficiencies were identified. One of three complaints was substantiated. Census: 43	U 000		
U 133	89.23(4)(c) SERVICES PROVIDER QUALIFICATIONS. Freedom from abuse, neglect and exploitation. A residenial care apartment complex shall ensure that tenants are free from abuse, neglect or financial exploitation by the facility or its staff. A residential care apartment complex shall not employ an individual who has been convicted of a crime that is substantially related to the circumstances of the job or for whom there is a substantiated finding of abuse or neglect or misappropriation of property in the department's registry for nurse aides, home health aides and hospice aides. The facility shall conduct a criminal records check with the Wisconsin department of justice and shall check with the department's registry for nurse aides, home health aides and hospice aides when hiring a service manager, service providers and other persons to work in the facility or have contact with	U 133		

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

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U 133	Continued From page 1 tenants. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure a criminal record check with the Wisconsin department of justice (DOJ) was conducted for 1 of 3 caregivers reviewed. The provider did not conduct a background check with the Wisconsin DOJ for Caregiver C at the time of hire. Findings include: On 04/24/2024 at approximately 2:15 p.m., Surveyor reviewed employee records provided by Administrator A. Surveyor reviewed the record of Caregiver C, who was hired on 08/29/2022. The record included a background information disclosure (BID) and a background check conducted in Kentucky. The record did not include a background check conducted with the Wisconsin DOJ. On 04/24/2024 at approximately 2:30 p.m., Surveyor interviewed Administrator A. Surveyor asked if a background check was completed with the Wisconsin DOJ at the time of Caregiver C's hire. Administrator A replied, "No. [S/he] moved here from Kentucky, so I didn't think it was necessary."	U 133		
U 211	89.28(6) RISK AGREEMENT UPDATING. The risk agreement shall be updated when the tenant's condition or	U 211		

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U 211	Continued From page 2	U 211		

service needs change in a way that may affect risk, as indicated by a review and update of the comprehensive assessment, by a change in the service agreement or at the request of the tenant or facility.

This Rule is not met as evidenced by:
Based on observation, record review and interview, the provider did not ensure a risk agreement was updated when 1 of 3 tenants reviewed had a change in condition identified in his/her comprehensive assessment that affected risk. Tenant 1 did not have a risk agreement related to his/her behavior of "digging" and smearing his/her feces.

Findings include:

On 04/24/2024 at approximately 12:00 p.m., Surveyor reviewed Tenant 1's record. Tenant 1 was admitted to the provider's complex on 02/04/2019. Tenant 1's comprehensive assessment, dated 02/12/2024, stated Tenant 1 was incontinent of bowel movement which resulted in bowel movement "all over the apartment."

On 04/24/2024 at approximately 12:45 p.m., Surveyor interviewed RN B. RN B stated Tenant 1 "digs" and ends up with bowel movement all over his/her apartment and common areas throughout the complex. RN B was concerned about the affects Tenant 1's behavior had on Tenant 1, caregivers and other tenants.

On 04/24/2024 at approximately 1:00 p.m., Surveyor interviewed Administrator A. Administrator A confirmed Tenant 1 was incontinent of bowel movement and had a history

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U 211	Continued From page 3 of digging which resulted in bowel movement throughout the complex which caregivers needed to stay on top of cleaning up. Surveyor asked Administrator A if s/he completed a risk agreement related to Tenant 1's behavior of digging and smearing feces due to the risk of injury and sanitation concerns. Administrator A replied, "No, but I can." On 04/24/2024 at approximately 2:15 p.m., Surveyor toured the facility with Administrator A. Surveyor observed Tenant 1 at the entrance of the elevator. Surveyor could smell a strong odor of feces, observed a tissue paper on Tenant 1's walker covered with a substances that appeared to be feces and observed the same substance on Tenant 1's fingernails.	U 211		
U 267	89.34(16) TENANT RIGHTS Rights of tenants. A tenant of a residential care apartment complex shall have all the rights listed in this section. These rights in no way limit or restrict any other rights of the individual under the U.S. Constitution, civil rights legislation or any other applicable statute, rule or regulation. Tenant rights are all of the following: (16) MEDICATIONS. Except as provided for in the service agreement, to have the facility not interfere with the tenant's ability to manage his or her own medications or, when the facility is managing the medications, to receive all prescribed medications in the dosage and at the intervals	U 267		

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U 267	Continued From page 4 prescribed by the tenant's physician and to refuse medication unless there is a court order. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 3 tenants received his/her medication as prescribed. Tenant 2 received Spironolactone after it was discontinued. Findings include: On 04/24/2024, Surveyor conducted a complaint investigation alleging the provider mismanaged tenant medications. On 04/24/2024 at approximately 10:30 a.m., Surveyor reviewed Tenant 2's record. Tenant 2 was admitted to the provider's complex on 04/17/2023. Tenant 2's record included a physician order, dated 07/17/2023, to discontinue Spironolactone 12.5 mg daily. Tenant 2's Medication Administration Record (MAR), dated 07/01/2023 to 08/31/2023, indicated Tenant 2 continued to receive his/her Spironolactone form 07/18/2023 through 08/16/2023. On 04/26/2024 at approximately 10:45 a.m., Surveyor interviewed Resident Care Coordinator D, who confirmed Tenant 2 received his/her Spironolactone after the medication should have been discontinued. Resident Care Coordinator D stated the error was caught when s/he took over as Resident Care Coordinator D and reviewed records.	U 267		