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 _____	R-C 09/30/2024

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 On 09/30/2024, Surveyor conducted a complaint investigation and verification visit at Emerald Ridge of Neenah, a RCAC in Neenah. Two deficiencies were identified. One deficiency was a repeat deficiency - See Statement of Deficiency (SOD) VODN11, dated 05/01/2024. The complaint was unsubstantiated. Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 40	{U 000}		
U 118	89.23(2)(a)2.c SERVICES SUFFICIENT SERVICES. Minimum required services. A residential care apartment complex shall have the capacity to provide all of the following services to all tenants, either directly or under contract: c. Nursing services: health monitoring, medication administration and medication management. This Rule is not met as evidenced by: Based on record review and interview, the	U 118		

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

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U 118	Continued From page 1	U 118		

provider did not ensure 2 of 3 tenants reviewed received proper health monitoring and medication administration services. Tenant 3's blood sugar (BS) was not rechecked and his/her physician was not contacted when his/her BS was outside parameters 4 times in 30 days. Tenant 4's Humalog 100 unit/ml administration was not documented for the 54 occurrences in 30 days that his/her BS indicated sliding scale insulin was needed.

Findings include:

On 09/30/2024, Surveyor reviewed the medication administration of 3 tenants as part of a verification visit. The following concerns were identified:

Example 1 - Tenant 3:

On 09/30/2024 at approximately 11:30 a.m., Surveyor reviewed Tenant 3's record. Tenant 3 was admitted to the provider's facility on 02/08/2023 with diagnosis of diabetes. Tenant 3's physician orders included an order for Novolog 100 unit/ml (Start Date: 07/31/2024): Prime with 2 units and inject per sliding scale with meals <150=0 units, 151-200=2 units, 201-250=4 units, 251-300=6 units, 301-350=8 units, 351-400=10 units, >400=12 units, recheck in 30 minutes and call physician if not <400. Tenant 3's Medication Administration Record (MAR), dated 09/01/2024 to 09/30/2024, identified the following dates when the Humalog order was not followed:

- 09/18/2024 7:45 a.m. BS 441 - No recheck or contact with physician documented.
- 09/23/2024 11:30 a.m. BS 409 - No recheck or contact with physician documented.
- 09/29/2024 7:26 a.m. BS 535 - No recheck or

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U 118	Continued From page 2	U 118		

contact with physician documented.
- 09/30/2024 8:12 a.m. BS 506 - No recheck or contact with physician documented.

On 09/30/2024 at approximately 11:55 a.m., Surveyor reviewed concerns with Resident Care Coordinator D regarding Tenant 3's diabetic management. Resident Care Coordinator D nodded his/her head and said "Okay." Resident Care Coordinator D denied auditing resident records to ensure medications with parameters were administered correctly but stated s/he would need to begin doing so.

Example 2- Tenant 4:

On 09/30/2024 at approximately 12:00 p.m., Surveyor reviewed Tenant 4's record. Tenant 4 was admitted to the provider's complex on 11/06/2023 with diagnosis of diabetes. Tenant 4's physician orders included Humalog 100 unit/ml (Start Date: 05/03/2024): Inject 1 unit 3 times daily before meals plus sliding scale <139=0 units, 140-170=1 unit, 171-200=2 units, 201-230=3 units, 231-260=4 units, 261-290=5 units, 291-320=6 units, 321-350=7 units, 351-380=8 units, 381-400=9 units, >401=Call physician. Tenant 4's MAR, dated 09/01/2024 to 09/30/2024 did not document the number of insulin units Tenant 4 received on the following dates when his/her BS reading indicated the need for sliding scale administration: 09/01/2024 8:29 a.m. BS 220, 09/02/2024 11:28 a.m. BS 140, 09/03/2024 8:09 a.m. BS 233, 09/03/2024 11:36 a.m. BS 152, 09/05/2024 8:31 a.m. BS 263, 09/05/2024 11:02 a.m. BS 308, 09/05/2024 4:10 p.m. BS 193, 09/06/2024 8:23 a.m. BS 202, 09/07/2024 8:43 a.m. BS 268, 09/08/2024 8:43 a.m. BS 190, 09/08/2024 11:30 a.m. BS 200, 09/08/2024 3:10 p.m. BS 176, 09/09/2024 9:11

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U 118	Continued From page 3 a.m. BS 141, 09/10/2024 8:46 a.m. BS 261, 09/10/2024 11:19 a.m. 148, 09/11/2024 8:24 a.m. BS 279, 09/12/2024 8:40 a.m. BS 229, 09/12/2024 11:31 a.m. BS 207, 09/12/2024 3:52 p.m. BS 215, 09/13/2024 4:04 p.m. BS 210, 09/14/2024 8:46 a.m. BS 322, 09/14/2024 11:27 a.m. BS 168, 09/15/2024 8:49 a.m. BS 160, 09/15/2024 4:03 p.m. BS 217, 09/16/2024 8:25 a.m. BS 300, 09/16/2024 11:59 a.m. BS 183, 09/16/2024 3:48 p.m. BS 144, 09/17/2024 8:45 a.m. BS 305, 09/17/2024 12:50 p.m. BS 236, 09/18/2024 10:38 a.m. BS 397, 09/18/2024 4:35 p.m. BS 270, 09/20/2024 8:45 a.m. BS 198, 09/20/2024 4:34 p.m. BS 178, 09/21/2024 8:30 a.m. BS 352, 09/21/2024 3:41 p.m. BS 211, 09/22/2024 8:55 a.m. BS 384, 09/22/2024 11:52 a.m. BS 213, 09/23/2024 8:25 a.m. BS 389, 09/23/2024 12:33 p.m. BS 201, 09/23/2024 4:27 p.m. BS 169, 09/24/2024 8:30 a.m. BS 363, 09/24/2024 11:36 a.m. BS 186, 09/25/2024 8:28 a.m. BS 276, 09/25/2024 11:24 a.m. BS 187, 09/26/2024 8:36 a.m. BS 352, 09/26/2024 3:25 p.m. BS 188, 09/27/2024 8:13 a.m. BS 208, 09/27/2024 11:16 a.m. BS 332, 09/27/2024 3:58 p.m. BS 218, 09/28/2024 8:38 a.m. BS 241, 09/28/2024 11:21 a.m. BS 140, 09/29/2024 8:17 a.m. BS 171, 09/29/2024 4:32 p.m. BS 163 and 09/30/2024 8:29 a.m. BS 165. On 09/30/2024 at approximately 12:30 p.m., Surveyor requested documentation of the amount of Humalog 100 unit/ml administered to Tenant 4 from Resident Care Coordinator D. Resident Care Coordinator D logged into the provider's electronic charting system and was unable to locate documentation. Resident Care Coordinator D stated the electronic program typically asked the caregiver to record the number of units administered, but for some reason that did not occur for Tenant 4. Resident Care Coordinator D	U 118		

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U 118	Continued From page 4 stated s/he would follow up on ensuring insulin administration was documented in the future.	U 118		
{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 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 reviewed received his/her medication as prescribed. Tenant 3 did not receive his/her Metoprolol as prescribed by his/her physician. This is a repeat deficiency - See Statement of Deficiency (SOD) VODN11, dated 05/01/2024.	{U 267}		

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{U 267}	Continued From page 5 Findings include: On 09/30/2024, Surveyor reviewed the medication administration of 3 tenants as part of a verification visit. On 09/30/2024 at approximately 11:30 a.m., Surveyor reviewed Tenant 3's record. Tenant 3 was admitted to the provider's complex on 02/08/2023 with diagnosis including hypertension. Tenant 3's physician orders included Metoprolol 25 mg (Start Date: 09/06/2024 - End Date: 09/18/2024): Take 1 tablet 2 times daily - Hold for systolic blood pressure (SBP) <110 and Metoprolol 25 mg (Start Date: 09/18/2024 - End Date: 09/23/2024): Take 1 tablet 1 time daily - Hold for systolic blood pressure (SBP) <110. Tenant 3's Medication Administration Record (MAR), dated 09/06/2024 to 09/23/2024, documented the following occurrences when Tenant 3's SBP was <110, indicating his/her Metoprolol should have been held; however, the medication was administered: - 09/06/2024 9:22 a.m. Blood Pressure (BP): 88/63 - 09/06/2024 8:04 p.m. BP 96/64 - 09/07/2024 8:31 a.m. BP 97/48 - 09/10/2024 7:47 p.m. BP 103/64 - 09/14/2024 8:06 a.m. BP 97/61 - 09/15/2024 8:18 a.m. BP 107/92 - 09/15/2024 7:58 p.m. BP 87/69 - 09/17/2024 7:17 p.m. BP 74/54 - 09/18/2024 8:20 a.m. BP 89/66 - 09/19/2024 8:14 a.m. BP 84/51 - 09/20/2024 8:33 a.m. BP 89/69 Tenant 3's physician orders also included Midodrine Hcl 10 mg (Start Date: 06/03/2024) -	{U 267}		

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{U 267}	Continued From page 6 Take 1 tablet by mouth as needed for SBP <110. Tenant 3's MAR, dated 09/06/2024 to 09/23/2024, indicated this PRN medication was never administered. On 09/30/2024 at approximately 11:55 a.m., Surveyor reviewed concern with Resident Care Coordinator D regarding the management of Tenant 3's Metoprolol. Resident Care Coordinator D denied auditing resident records to ensure medications with parameters were administered correctly, but stated s/he would need to begin doing so.	{U 267}		