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 03/27/2026

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 03/24/2026, with information gathered through 03/27/2026, Surveyor conducted a standard survey and a verification visit at Emerald Ridge of Neenah. One (1) of 2 previous citations were corrected. As a result of the survey, 1 deficiency was identified. One (1) of 1 deficiency was a repeat violation. (See SOD (Statement of Deficiency) VODN12, dated 09/30/2024 and SOD VODN13, dated 06/16/2025). Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed Census: 42	{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.	{U 118}		

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

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{U 118}	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 (Tenant 1 and 5) of 3 tenants reviewed received proper health monitoring. Tenant 1 had an order for Vitamin B-1 100mg(milligrams) tablet take 1 tablet by mouth once daily. Tenant 1's January through March 2026 MAR (Medication Administration Record) indicated Tenant 1's Vitamin B-1 was on "hld." Tenant 1's record did not contain documentation Tenant 1's physician was aware Tenant 1 was not receiving the vitamin. Tenant 5 had an order for furosemide 20mg to take 1 tablet once daily as needed for a weight gain of 3lbs(pounds) overnight or 5lbs in a week. Tenant 5's weight was not taken daily to see if there was a weight gain and if Tenant 5 needed to take the furosemide tablet. This is a repeat deficiency for a third time. See Statement of Deficiency (SOD) VODN12, dated 09/30/2024 and SOD VODN13, dated 06/16/2025. Findings include: Tenant 1 On 03/24/2026, Surveyor reviewed Tenant 1's record. Tenant 1 was admitted to the facility on 10/08/2025 with diagnoses to include hypertension, anemia, chronic kidney disease, type 2 diabetes mellitus, chronic obstructive pulmonary disease and heart failure. Tenant 1 had an active physician order sheet dated 03/24/2026 which indicated Tenant 1 had	{U 118}		

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{U 118}	Continued From page 2 an order for Vitamin B-1 100mg tablet take 1 tablet by mouth once daily. Surveyor reviewed Tenant 1's MAR for January through March 2026. The MAR indicated Vitamin B-1 was "Hld" On 03/24/2026 at approximately 11:00 AM and 1:00 PM, Surveyor interviewed RCC (Resident Care Coordinator) F and Administrator A. RCC F stated "Hld" meant hold. RCC F stated s/he thought Tenant 1 had an order to self administer the Vitamin B-1. RCC F stated s/he would look for the self administer order. RCC F came back a few hours later and stated Tenant 1 had an order when first admitted for Vitamin B-1 and the pharmacy provided a 30 day supply. Once the 30 day supply was used up, the pharmacy had contacted the facility and explained that Vitamin B-1 would not be covered by insurance and Tenant 1 would be responsible to pay. RCC F stated s/he spoke with Tenant 1 and Tenant 1 stated s/he would just not take it or would have a family member pick it up. RCC F stated that is where s/he left it. RCC F stated s/he was unsure if family member ever picked it up. RCC F indicated there was no self administration order on file for the Vitamin B-1. Administrator A stated s/he spoke with Tenant 1 this morning and Tenant 1 verified s/he had not been taking the Vitamin B-1. Administrator A verified there was no documentation from Tenant 1's physician regarding Tenant 1 not taking the Vitamin. Administrator A stated they would be talking with Tenant 1's physician on Thursday this week to find a resolution. Tenant 5 On 03/24/2026, Surveyor reviewed Tenant 5's record. Tenant 5 was admitted to the facility on	{U 118}		

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{U 118}	Continued From page 3 03/31/2025 with diagnoses to include bipolar disorder, unspecified sequelae of cerebral infarction, hypertension, anxiety, depression and insomnia. Tenant 5's ISP with a print date of 03/24/2026, indicated staff administer Tenant 5's medications. In addition, the ISP stated to "check resident weight daily before breakfast. Follow orders for Furosemide if needed for weight increase. Daily @ [at] 8:00AM." Tenant 5 had an active physician order sheet dated 03/24/2026 which indicated Tenant 5 had an order for furosemide 20mg to take 1 tablet once daily as needed for a weight gain of 3lbs overnight or 5lbs in a week. In addition, the physician order sheet stated, "Check resident weight daily before breakfast. Follow orders for Furosemide if needed for weight increase." Surveyor reviewed Tenant 5's "Care History" report for daily weights from January through March 2026. Tenant 5 did not have a daily weight recorded for the following dates: January 3-12, 14-22, 24-29, 31 February 1-8, 10-11, 13-18, 21-22, 24, 26-28 March 1, 3, 5, 7-12, 15-16, 19-22 Surveyor reviewed Tenant 5's MAR (Medication Administration Record) for January through March 2026. Tenant 5 only received furosemide 20mg on 03/17/2026 during this period of time. On 03/24/2026 at approximately 1:00 PM, Surveyor interviewed Caregiver B. Caregiver B verified s/he was the caregiver who administered the furosemide to Tenant 5 on 03/17/2026. Caregiver B stated s/he administered the furosemide to Tenant 5 on 03/17/2026 because Tenant 5's weight was 287lbs. Caregiver B stated this was an increase from Tenant 5's last weight	{U 118}		

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{U 118}	Continued From page 4 on 03/14/2026 which was 279.9lbs. Caregiver B stated s/he does not pass medications for Tenant 5 very often so was just following how the order was written. On 03/24/2026 at approximately 1:15 PM, Surveyor interviewed Caregiver D. Caregiver D stated s/he attempts to get Tenant 5's weight on a daily basis but by the time s/he gets to Tenant 5's room after passing medications, Tenant 5 has left for the day. Caregiver D stated Tenant 5 volunteers in the community and is gone most days, sometimes not returning until late at night. Caregiver D indicated in the future, s/he will attempt to get Tenant 5's weight when s/he passes Tenant 5's medications in the morning instead of waiting until med pass is finished and go back. On 03/24/2026 at approximately 1:30 PM, Surveyor interviewed Administrator A and RCC F. Administrator A acknowledged Tenant 5's weights were not being taken daily and stated they would be following up with Tenant 5's physician about the orders. RCC F stated they would put a scale in Tenant 5's room so staff could take his/her weight when giving Tenant 5 his/her morning medications.	{U 118}		