STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018403	A. BUILDING: _____ B. WING _____	C 06/27/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY LIVING 2 A TOUCH OF HOME	612 E 25TH ST MARSHFIELD, WI 54449

(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 06/22/2023, Surveyors conducted a standard survey and one complaint investigation at Serenity Living 2 A Touch of Home. Additional information was gathered through 06/27/2023. As a result of the standard survey, one (1) new deficiency was identified and the complaint was unsubstantiated. Census: 7	N 000		
N 423	83.37(3)(g) Medication storage: controlled substances. Controlled substances. The CBRF shall provide separately locked and securely fastened boxes or drawers or permanently fixed compartments within the locked medications area for storage of schedule II drugs subject to 21 USC 812 (c), and Wisconsin ' s uniform controlled substances act, ch. 961, Stats. This Rule is not met as evidenced by: Based on observation and staff interview, the provider did not properly store schedule II drugs in separately locked and securely fastened boxes or drawers or permanently fixed compartments within the locked medications area subject to 21 USC 812 (c), and Wisconsin's uniform controlled substances act, ch. 961, Stats. On 06/22/2023 at least 30 syringes of morphine sulfate were stored in an unfastened and unlocked storage box in the common use refrigerator in the kitchen. Note: Schedule II drugs are defined as drugs with a high potential for abuse, with use potentially leading to severe psychological or physical	N 423		

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

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N 423	Continued From page 1	N 423		

dependence. The Food and Drug Association indicates morphine sulfate is a controlled schedule II substance used to treat severe pain.

Finding Include:

On 06/22/2023 at approximately 11:00 AM, during a tour of the facility while accompanied by Caregiver A, Surveyors observed an unfastened black storage box in the common use refrigerator in the kitchen. Caregiver A confirmed the black storage box was used to store medications that needed to be kept cold. Surveyors removed the unfastened storage box from the refrigerator and observed it had the ability to be locked, but it was unlocked. Inside the box, Surveyors observed:

---at least 6 syringes of morphine sulfate prescribed for Resident 1 in a zip lock bag

---at least 24 syringes of morphine sulfate prescribed for Resident 2 in a zip lock bag

Surveyors also observed additional medications for Resident 2 were in the unfastened and unlocked storage box included approximately 9 syringes of lorazepam and approximately 6 syringes of haloperidol.

On 06/22/2023 at approximately 11:05 AM, Caregiver A confirmed Surveyors' observations and stated, "That should have been locked." Caregiver A explained the box had been unlocked since s/he and hospice staff counted the medications sometime prior to Surveyors' arrival. Note: Surveyors entered the facility at 9:30 AM.

On 6/29/2023 at approximately 11:30 AM, Surveyors discussed the observations with Owner B and Corporate Manager C. Both Owner B and

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N 423	Continued From page 2 Corporate Manager C confirmed schedule II medications should be stored in separately locked and securely fastened boxes or drawers or permanently fixed compartments within the locked medications area. Owner B stated, "We will absolutely work on fixing that. This is unacceptable."	N 423		