STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015616	A. BUILDING: _____ B. WING _____	C 02/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
KENOSHA SENIOR LIVING	3109 30TH AVE KENOSHA, WI 53140

(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 02/23/2024, Surveyor conducted a complaint investigation and standard survey at Kenosha Senior Living. As a result, 3 deficiencies were identified. The complaint was unsubstantiated. Census: 34	N 000		
N 406	83.37(1)(g) Disposition of medications. Disposition of medications. 1. When a resident is discharged, the resident ' s medications shall be sent with the resident. 2. If a resident ' s medication has been changed or discontinued, the CBRF may retain a resident ' s medication for no more than 30 days unless an order by a physician or a request by a pharmacist is written every 30 days to retain the medication. 3. The CBRF shall develop and implement a policy for disposing unused, discontinued, outdated, or recalled medications in compliance with federal, state and local standards or laws. The CBRF shall arrange for the stored medications to be destroyed in compliance with standard practices. Medications that cannot be returned to the pharmacy shall be separated from other medication in current use in the facility and stored in a locked area, with access limited to the administrator or designee. The administrator or designee and one other employee shall witness, sign, and date the record of destruction. The record shall include the medication name, strength and amount. This Rule is not met as evidenced by: Based on observation and interview, the provider did not establish an effective procedure for proper destruction and disposal of expired medications.	N 406		

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

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N 406	Continued From page 1 Expired medications were observed stored with resident's non-expired medications for 1 of 1 medication cart. Findings include: On 02/23/2024, at 11:30 AM, Surveyor observed the medication cart. Surveyor observed the following expired medications: Resident 1 Senna-S 8.6/50 milligrams (mg) with a discard date of 01/31/2024 Resident 2 Senna-S 8.6/50 mg with a discard date of 01/30/2024 Resident 3 Meclizine 25 mg with a discard date of 02/18/2024 Resident 4 Prochlorperazine 10 mg with a discard date of 02/22/2024 On 02/23/2024, at 11:30 AM, Surveyor interviewed Caregiver C. Caregiver C stated, "We typically go through the cart once a month." On 02/23/2024, at 1:30 pm, Surveyor interviewed Registered Nurse (RN) B. RN B confirmed expired medication should have been removed from the medication cart. RN B reported staff were to review the medication cart on a weekly basis.	N 406		
N 452	83.41(3)(b) Food safety.	N 452		

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N 452	Continued From page 2 Food safety. Whether food is prepared at the CBRF or off-site, the CBRF shall store, prepare, distribute and serve food under sanitary conditions for the prevention of food borne illnesses, including food prepared off-site, according to all of the following: 1. The CBRF shall refrigerate all foods requiring refrigeration at or below 40°F. Food shall be covered and stored in a sanitary manner. 2. The CBRF shall maintain freezing units at 0°F or below. Frozen foods shall be packaged, labeled and dated. 3. The CBRF shall hold hot foods at 140°F or above and shall hold cold foods at 40°F or below until serving. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure food was stored to prevent food borne illness. The provider did not properly seal food, maintain labels or dates on open food. Findings include: On 02/23/2024, at 9:25 AM, Surveyor toured the facility kitchen and observed the following: -bowl of english muffins, eggs with cheese and sausage links, wrapped with foil around the food, leaving the top open and exposed. There was no label. -bag of pepperoni unsealed and undated -ziploc bag of lunch meat unsealed and undated -plastic container of peas, carrots, meat, and gravy undated	N 452		

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N 452	Continued From page 3 -two bags of what appeared to be a type of chicken salad containing grapes, undated -sliced white American cheese unsealed and undated -container of noodles, undated -liquid egg product, opened and undated with open date -container of what appeared to be a potato side dish, unlabeled and undated -container of brown liquid with meat, unlabeled and undated -container of season au jus with Italian style seasoned beef, unlabeled with open date -two ziploc bags of corn, undated -two bags of rice, undated -bucket of European style butter blend, with a label which stated, "perishable keep refrigerated". The butter was out on the counter for the duration of the survey. According to the Wisconsin Food Code, the Federal Department of Agriculture's Food Code, and ServSafe standards, date marking is necessary to indicate when food must be consumed or discarded. These standards indicate refrigerated, read to eat (RTE), potentially hazardous food (PHF), and time/temperature controlled for safety (TCS) foods that are removed from manufacturer packaging and/or prepared for consumption must be date marked and discarded within 7 days. Refrigerated, RTE, PHF, and TCS foods prepared and packaged in a food processing plant shall also be date-marked when opened in the facility (date not to exceed 7 days). (ServSafe Coursebook, 7th Ed., 2017, p. 5-23) On 02/23/2024, at 10:30 AM, Surveyor interviewed Cook D. Cook D reported food should have been labeled and dated for food safety.	N 452		

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N 452	Continued From page 4 Cook D stated, "I try to keep up on everything, but there is a lot to do, and staff always asking for help." On 02/23/2024, at 1:30 PM, Surveyor interviewed Administrator A. Administrator A acknowledged the above concerns and reported staff would need additional training to ensure the kitchen was following safe food storing practices. Administrator A reported s/he would ensure the kitchen was "buttoned up a bit."	N 452		
N 499	83.45(3) Toxic substances. Toxic substances. The CBRF shall ensure that cleaning compounds, polishes, insecticides and toxic substances are labeled and stored in a secure area. This Rule is not met as evidenced by: Based on observation and interview, the provider did not ensure all toxic substances and cleaning compounds were securely stored in 3 of 3 areas. Findings include: On 02/23/2024, at 9:20 AM, Surveyor toured the facility and observed the following: Hair Salon The door to the hair salon was propped open with a chair and a rock. Inside the hair salon, on the counter were a bottle of concentrated disinfectant cleaner and deodorizer and a bottle of Clorox disinfectant cleaner with bleach. In a cupboard were a bottle of Soft Scrub with bleach cleaner, Array disinfectant deodorizer and a bottle of Citrus II germicidal deodorizing cleaner.	N 499		

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N 499	Continued From page 5 Rear living room A can of Glade air freshener located in an activity cupboard. Kitchen The doors to the kitchen were propped open with a kickdown door stop. Under each of the residential sinks were a bottle of Purell surface disinfectant, can of Comet cleaner, Spectracide ant shield insect killer and a can of Sprayway stainless steel cleaner and polish. Surveyor observed residents moving freely throughout the facility. On 02/23/2024, at 1:30 PM, Surveyor interviewed Administrator A. Administrator A confirmed all toxic substances and cleaning compounds were required to be securely stored. Administrator A reported s/he would ensure staff were educated to ensure all toxic substances were locked up at all times.	N 499		