STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0019266	A. BUILDING: _____ B. WING _____	R-C 01/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MORELL MANOR LLC	6429 DURAND AVE MOUNT PLEASANT, WI 53406

(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
{M 000}	INITIAL COMMENTS On 01/27/2026, with information gathered through 01/30/2026, Surveyor conducted 2 complaint investigations and a verification visit at Morell Manor LLC, for Statement of Deficiency (SOD) H80P11 and 0SR111.The complaint is substantiated. Two deficiencies were identified. Two of 2 deficiencies were repeat deficiencies identified in the following SODs: 0SR111, dated 02/17/2025, M0386 and M0582 were repeat deficiencies. Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 2	{M 000}		
{M 386}	88.06(2)(c) SERVICE AGREEMENT REQUIREMENTS A service agreement shall specify all of the following: This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 2 of 2 residents (Resident 1 and Resident 2) reviewed service agreements specified the following: the services that will be provided and a description of each, charges for room and board and services, the frequency, amount, source and method of payment. This is a repeat deficiency. See statement of deficiency (SOD) 0SR111, dated 02/17/2025.	{M 386}		

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

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{M 386}	Continued From page 1 Findings include: On 01/27/2026, at approximately 12:27 PM, Surveyor reviewed Resident 1's and Resident 2's record and identified the following: -Resident 1 was admitted to the provider's home on 06/23/2023. Resident 1's service agreement did not specify the following: the services that will be provided and a description of each, charges for room and board and services, the frequency, amount, source and method of payment. -Resident 2 was admitted to the provider's home on 01/23/2024. Resident 2's service agreement did not specify the following: the services that will be provided and a description of each, charges for room and board and services, the frequency, amount, source and method of payment. On 01/30/2026, at approximately 2:45 PM, Surveyor interviewed Licensee A. Licensee A confirmed Resident 1's and Resident 2's service agreements did not specify the following: the services that will be provided and a description of each, charges for room and board and services, the frequency, amount, source and method of payment. Licensee A did not provide an explanation as to why the service agreements were not updated for Resident 1 and Resident 2. Licensee A reported s/he would update the service agreements to reflect the departments requirement.	{M 386}		
{M 582}	88.10(3)(q) Medications Medications. To receive all prescribed medications in the dosage and at the intervals prescribed by the	{M 582}		

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{M 582}	Continued From page 2 resident's physician, and to refuse medications unless there has been a court order under s. 51.61(1)(g), Stats., with a court finding of incompetency. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure 1 of 1 resident (Resident 1) received his/her medications as prescribed by their physician. Resident 1 had a total of 125 doses of medication not administered between 01/06/2026 and 01/27/2026. Resident 1 was prescribed the following medication's: Breo Ellipta, lisinopril, topiramate tablet, calcium citrate, cholestyramine, pantoprazole, Xifaxaxan, aripiprazole, Vraylar, magnesium glycinate, duloxetine, multivitamin tablet, aspirin, meloxicam, vitamin D, gabapentin, mupirocin sucralfate, trazadone, melatonin, tramadol, baclofen, lidocaine, and lorazepam. This is a repeat deficiency. See statement of deficiency (SOD) 0SR111, dated 02/17/2025. Findings include: On 01/09/2026, the Department received a complaint alleging residents were refused prescribed medications upon request. On 01/27/2026, at approximately 12:27 PM. Surveyor reviewed Resident 1's record and identified the following:	{M 582}		

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{M 582}	Continued From page 3 -Resident 1 was admitted to the provider's home on 08/29/2024. Resident 1 had diagnoses including attention deficit disorder, anxiety, paranoid schizophrenia, dementia with behavioral disturbance, borderline personality disorder, depression, hyperthyroidism, chronic pain, thyroid multiple nodules, cerebral infarction, cirrhosis, coronary artery disease, chronic sinusitis, mitral valve disorder, cerebrovascular disease, epilepsy and recurrent seizures, idiopathic peripheral neuropathy, osteoarthritis primary generalized, late effects of cerebral infarction hemiplegia affecting nondominant side, hepatitis c virus chronic, essential hypertension, carpal tunnel syndrome, asthma intermittent, muscle weakness, tinnitus, urinary incontinence, persistent insomnia, visual impairment, organic sleep apnea obstructive, hearing loss and gastro intestinal disease Resident 1 medication administration record (MAR), dated 01//06/2026 to 01/27/2026, had a total of 125 chart codes listed as "B" which indicated the medication was refused by Resident 1. Resident 1's January 2026 MAR stated Resident 1 was prescribed the following medications: -Breo Ellipta 100-25, 1 puff daily - Lisinopril 40 milligrams (mg) tablet 1 tablet, 2 times a day -Topiramate 50mg tablet 1 tablet, 2 times a day -Calcium citrate 200mg tablet, 2 tablets, times a day -Cholestyramine Ligh 4 grams, 2 times a day -Xifaxaxan 550mg tablet, 1 tablet 2 times a day -Aripiprazole 5mg tablet, 1 capsule every morning -Vraylar 1.5mg capsule, 1 capsule every morning	{M 582}		

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{M 582}	Continued From page 4 -Magnesium glycinate chew gummy, 1 gummy once a day -Duloxetine 30mg, 3 capsules by mouth daily -Multivitamin tablet, 1 tablet daily -Aspirin 81mg tablet, 1 table daily -Meloxicam 7.5 mg tablet, 1 tablet daily -Vitamin D 400 international units (IU) tablet, 1 tablet once a day -Gabapentin 300mg capsule, 1 tablet 4 times daily -Mupirocin 2% ointment, 3 times a day -Sucralfate 1mg tablet, 1 tablet 4 times a day -Trazadone 100 mg tablet, 1 tablet nightly at bed time -Melatonin 5mg tablet, 1 tablet nightly as needed -Tramadol extended release (ER) 200mg tablet - 1 tablet daily -Baclofen 10mg tablet, 1 tablet 4 times a day -Lidocaine 5% patch, 2 patches a day -Lorazepam 0.5 mg tablet, as needed (PRN) -Pantoprazole 40mg, 1 tablet twice daily Resident 1's January 2026 MAR had chart code B, indicated resident refused medications entries on the following dates: - Breo Ellipta 100-25, 01/06/2026- 01/27/20226, 8:00 AM (6 entries) -Topiramate 50mg tablet 2 times a day, 01/06/2026-01/27/2026, 8:00 AM (4 entries) -Calcium citrate 200mg tablet, 01/06/2026-01/27/2026, 8:00 AM (5 entries), 4:00 PM (1 entry) -cholestyramine ligh 4 grams, 01/06/2026-01/27/2026, 8:00 AM (5 entries) - Pantoprazole 40mg tablet, 01/06/2026-01/27/2026, 8:00 AM (4 entries), 4:00 PM (1 entry) -Xifaxaxan 550mg tablet, 01/06/2026-01/27/2026, 10:00 AM (3 entries), 10:00 PM (1 entry)	{M 582}		

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{M 582}	Continued From page 5 -Aripiprazole 5mg tablet, 01/06/2026-01/27/2026, 8:00 AM (21 entries) -Vraylar 1.5mg capsule, 01/06/2026-01/27/2026, 8:00 AM (13 entries) -Magnesium glycinate chew gummy, 01/06/2026-01/27/2026, 8:00 AM (4 entries) -Multivitamin tablet, 01/06/2026-01/27/2026, 8:00 AM (4 entries) -Vitamin D 400 IU tablet, 01/06/2026-01/27/2026, 8:00 AM (4 entries) -Gabapentin 300mg capsule 4 times a day, 01/06/2026-01/27/2026, 8:00 AM (6 entries), 12:00 PM (2 entries), 4:00 PM (1 entry) -Mupirocin 2% ointment, 01/06/2026-01/27/2026, 8:00 AM (7 entries), 4:00 PM (1 entry) -Sucralfate 1mg tablet, 01/06/2026-01/27/2026, 8:00 AM (6 entries), 12:00 PM (5 entries), 4:00 PM (2 entries), 8:00 PM (2 entries) -Trazadone 100 mg tablet, 01/06/2026-01/27/2026,10:00 PM (5 entries) -Melatonin 5mg tablet, 01/06/2026-01/27/2026, (1 entry) -Baclofen 10mg tablet, 01/06/2026-01/27/2026, 8:00 AM (5 entries), 12:00 PM (3 entries), 4:00 PM (1 entry) -Lidocaine 5% patch, 01/06/2026-01/27/2026, 8:00 PM (1 entry) -Melatonin 5mg tablet, 01/06/2026-01/27/2026, 10:00 PM (1 entry) Resident 1 had a total of 125 doses of medication not administered between 01/06/2026 and 01/27/2026. On 01/27/2026, at approximately 1:30 PM, Surveyor interviewed Human Resources (HR) Director D. HR Director D reported Resident 1 often missed the cut off time to take his /her medications. HR Director D reported medications should be taken 1 hour before and 1 hour after	{M 582}		

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{M 582}	Continued From page 6 the scheduled medication administration time. HR Director D reported the medication administration record (MAR) was marked with the letter "B" which indicated the resident refused the medication. HR Director reported Resident 1 requested his/her medications after the time allotted and the medication would not be administered and was documented as refused on the MAR. On 01/27/2026, at approximately 1:50 PM, Survey interviewed Resident 1. Resident 1 reported s/he requested his/her medications, and s/he was denied the medications. Resident 1 reported s/he often asked for his/her medications after the scheduled medication administration time. Resident 1 reported s/he requested the medications a few minutes after his/her scheduled medication administration time, and the facility staff would not administer the requested medications. On 01/30/2026 at approximately 2:34 PM, Surveyor interviewed Licensee A. Licensee A confirmed chart code B indicated Resident 1 refused his/her medications as the medications were not taken 1 hour before and 1 hour after the scheduled administration time. Licensee A reported Resident 1 requested to take his/her medications after the timeframe allotted, so s/he could not take his/her medications. Licensee A reported staff would document the medication as refused on the MAR. Licensee A confirmed the prescribing physician was not contacted to discuss Resident 1's medication administration concerns.	{M 582}		