Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0015732	A. BUILDING: _____ B. WING _____	R-C 08/05/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEW DAY ASSISTED LIVING- ELKHORN	1550 COUNTRY CLUB PARKWAY ELKHORN, WI 53121

(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 08/05/2025, Surveyor conducted a standard survey and verification visit at Frontida of Elkhorn. One deficiency was identified. One of 1 deficiency was a repeat violation. See Statement of Deficiency (SOD) NLJO11, dated 02/01/2024. The deficiency from SOD NLJO13, dated 10/14/2024 was corrected. Under statutory provisions of Wis. Stat. Ch. 50, a $200.00 revisit fee is being assessed. Census: 28	{N 000}		
N 352	83.32(3)(h) Rights of Residents: Receive medication In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights: Receive medication. Receive all prescribed medications in the dosage and at intervals prescribed by a practitioner. The resident has the right to refuse medication unless the medication is court ordered. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure that Resident 10 received his/her medications as prescribed by his/her practitioner. From 05/01/2025-07/31/2025, staff administered Resident 10's kidney disease medication on 17 occurrences even though his/her blood pressure fell within parameters to hold the medication.	N 352		

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

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N 352	Continued From page 1 This is a repeat violation. See Statement of Deficiency (SOD) NLJO11, dated 02/01/2024. Findings include: On 08/05/2025, Surveyor reviewed Resident 10's record and identified the following: Resident 10 was admitted to the provider 01/03/2023 with diagnoses including chronic kidney disease stage 2. Resident 10's most recent individual service plan (ISP) dated 07/15/2025 indicated staff administer his/her medications. Resident 10's physician orders included Midodrine 2.5 mg tablet with instructions to take 3 tablets (7.5) by mouth three times daily for kidney disease (Hold for SBP greater than 140), with a start date of 05/01/2025. Resident 10's medication administration record (MARs) from 05/01/2025-07/31/2025 documented the following: -05/07/2025 (8pm administration): Blood pressure documented as 146/62, Midodrine administered -05/09/2025 (2pm administration): Blood pressure documented as 166/82, Midodrine administered -05/09/2025 (8pm administration): Blood pressure documented as 160/78, Midodrine administered -05/19/2025 (8am administration): Blood pressure documented as 155/80, Midodrine administered -06/07/2025 (8am administration): Blood pressure documented as 141/81, Midodrine administered -06/09/2025 (8pm administration): Blood pressure documented as 163/98, Midodrine administered -06/10/2025 (8am administration): Blood pressure documented as 162/60, Midodrine administered -06/14/2025 (2pm administration): Blood pressure documented as 141/71, Midodrine administered -06/15/2025 (8am administration): Blood pressure documented as 143/81, Midodrine administered	N 352		

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N 352	Continued From page 2 -06/15/2025 (8pm administration): Blood pressure documented as 141/81, Midodrine administered -06/17/2025 (8am administration): Blood pressure documented as 150/98, Midodrine administered -06/18/2025 (8pm administration): Blood pressure documented as 160/72, Midodrine administered -06/19/2025 (8am administration): Blood pressure documented as 144/68, Midodrine administered -06/23/2025 (8pm administration): Blood pressure documented as 180/96, Midodrine administered -06/28/2025 (8pm administration): Blood pressure documented as 152/89, Midodrine administered -07/07/2025 (8pm administration): Blood pressure documented as 162/81, Midodrine administered -07/31/2025 (8pm administration): Blood pressure documented as 164/111, Midodrine administered On 08/05/2025 at 1:30 PM, Surveyor interviewed Regional Nurse N, Executive Director O, and Nurse P regarding Resident 10's Midodrine. Management staff acknowledged an understanding of the concern and confirmed this area as a training topic. Nurse P reported s/he was aware of the above concerns and started providing reeducation to staff. Nurse P stated staff were having trouble understanding the less than or more than symbols, so s/he started going into the MAR and writing more/less than. Management staff reported they will continue to work with staff to ensure compliance with parameter medications.	N 352		