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	0018097	A. BUILDING: _____ B. WING _____	R-C 02/19/2025

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COMMUNITY LIVING OF BROOKFIELD LLC	460 LEANORE LANE BROOKFIELD, WI 53005

(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 02/19/2025, with information gathered through 02/20/2025, Surveyor conducted a verification visit at Community Living of Brookfield. Three deficiencies were identified. Three of 3 deficiencies were repeat (see Statement of Deficiency (SOD) Q1E312, SOD Q1E313, and SOD Q1E314.) Under statutory provisions of Wis. Stat. Ch. 50, a $200 revisit fee is being assessed. Census: 3	{M 000}		
{M 466}	88.07(3)(e)1 MEDICATION- RECORD KEEPING The licensee shall keep a record of all prescription medications controlled, dispensed or administered by the licensee which show the name of the resident, the name of the particular medication, the date and time the resident took the medication and errors and omissions. The medication controlled by the licensee shall be kept in a locked place. This Rule is not met as evidenced by: Based on observation, record review, and interview, the provider did not ensure accurate records were kept of all prescription medications administered for 3 of 3 records reviewed. This deficiency is being cited for a fifth time. See Statement of Deficiency (SOD) Q1E311, dated 11/08/2022, SOD Q1E312, dated 10/04/2023, SOD Q1E313, dated 08/19/2024, and Q1E314,	{M 466}		

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

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{M 466}	Continued From page 1	{M 466}		

dated 11/12/2024.

Resident 1's, Resident 3's and Resident 4's Medication Administration Records (MAR) were documented with the code "Other" without a rationale or blanks appeared where staff should have initialed medication administration.

Resident 3's insulin that was stored in the refrigerator was not stored in a locked place within the refrigerator.

Resident 4 did not receive his/her Lactase noon dose on 02/18/2025, but it had been documented as administered.

Findings include:

On 02/19/2025, at approximately 2:15 PM, Surveyor and Licensee D observed 4 of Resident 3's Basaglar KwikPens in the refrigerator. The Kwik Pens were in the box that the medication had been dispensed in, which had been placed in a plastic bag. The Kwik Pens sat on a shelf in the door and were not securely stored.

On 02/19/2025, at approximately 2:30 PM, Surveyor and Licensee D observed Resident 1's, Resident 3's and Resident 4's medications in the med closet. Surveyor requested a copy of each resident's MAR. Licensee D stated the Surveyor would have to obtain those from Manager A.

On 02/19/2025 at 2:57 PM, Surveyor requested the records from Manager A.

On 02/20/2025, Surveyor reviewed Resident 1's, Resident 3's and Resident 4's January and February MARs, dated 01/11/2025 to 02/19/2025, which documented:

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{M 466}	Continued From page 2 Example 1: Resident 1 Resident 1 moved into the home on 03/13/2021. Resident 1's MARs documented: Linzess 290 MCG (microgram) - Take 1 capsule by mouth in the morning before breakfast. Schedule at 8:00 AM. Start Date: 07/23/2024. 01/13 - Other - No rationale 01/14 - Other - No rationale 01/20 - Other - No rationale 01/21 - Other - No rationale Relistor 150 MG (milligram) - Take 1 tablet by mouth in the morning. Start Date: 07/23/2024. 01/17 - Other - No rationale 01/21 - Other - No rationale 01/22 - Other - No rationale 01/24 - Other - No rationale Spiriva Handihaler (inhaler) 18 MCG - Inhale contents of 1 capsule via Handihaler in the morning. Start Date: 07/22/2024. 01/21 - Other - No rationale 01/22 - Other - No rationale 01/28 - Other - No rationale 01/29 - Other - No rationale Example 2: Resident 3 Resident 3 was admitted to the facility 08/27/2021. Resident 3's MARs documented: Nystatin 100,000 Unit/Gram - Apply topically to affected area 2 times a day to dry skin after cleansing then apply barrier cream on top. Scheduled at 8:00 AM and 8:00 PM. Start Date: 01/03/2025. 01/20 8:00 AM, 01/21 8:00 AM, 01/23 8:00 PM, 02/01 8:00 AM, 02/02 8:00 AM, 02/03 8:00 AM,	{M 466}		

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{M 466}	Continued From page 3	{M 466}		

02/06 8:00 AM, 02/07 8:00 AM, 02/08 AM, 02/10 8:00 AM, 02/11 8:00 AM, 02/13 8:00 AM, 02/14 8:00 AM, 02/15 8:00 AM - Other - No rationale
Atorvastatin Calcium 20 MG - Take 1 tablet by mouth at bedtime. Scheduled at 8:00 PM. Start Date: 01/12/2025.
02/03, 02/04, 02/09, 02/15 - MAR was blank
Risperidone 2 MG - Take 1 tablet by mouth at bedtime. Scheduled at 8:00 PM. Start Date: 10/21/2024.
02/03, 02/04, 02/09, 02/15 - MAR was blank
Metformin - Take 2 tablets (1000 MG) by mouth 2 times a day in the morning and evening with meals. Scheduled at 8:00 AM and 4:00 PM. Start Date: 01/15/2025.
02/03 4:00 PM, 02/04 8:00 AM, 02/04 4:00 PM - MAR was blank
Divalproex Sodium 125 MG - Take 6 capsules (750 MG) by mouth 2 times a day in the morning and evening. Scheduled at 8:00 AM and 4:00 PM. Start Date: 10/22/2024.
02/03 4:00 PM, 02/04 8:00 AM, 02/04 4:00 PM - MAR was blank

Example 3: Resident 4

Resident 4 moved into the home 07/02/2021.

Surveyor and Licensee D observed Resident 4's noon dose of Lactase, dated 02/18/2025, in his/her medication basket.
Resident 4's MAR documented that s/he had been administered this medication.

Resident 4's MARs contained blanks where medication administration should have been documented:
Acetaminophen 500 MG - Take 1 tablet by mouth 3 times a day. Scheduled at 8:00 AM and 8:00 PM. Start Date: 11/27/2024.

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{M 466}	Continued From page 4 02/03 8:00 PM, 02/04 8:00 AM, 02/04 8:00 PM - MAR was blank Aspirin 81 MG - Take 1 tablet by mouth 2 times a day. Scheduled at 8:00 AM and 8:00 PM. Start Date: 05/06/2024. 02/03 8:00 PM, 02/04 8:00 AM, 02/04 8:00 PM - MAR was blank Calcium Carb + Vitamin D 500 MG - Take 1 tablet by mouth 2 times a day. Scheduled at 8:00 AM and 8:00 PM. Start Date: 01/16/2025. 02/03 8:00 PM, 02/04 8:00 AM, 02/04 8:00 PM - MAR was blank Senna Docusate - Take 2 tablets by mouth in the morning. Scheduled at 8:00 AM. Start Date: 01/02/2025. 02/04, 02/09 - MAR was blank Sertraline - Take 1 tablet by mouth in the morning. Scheduled at 8:00 AM. Start Date: 04/24/2024. 02/04, 02/09 - MAR was blank Lactulose - Take 45 MLS (milliliters) by mouth 2 times a day. Scheduled at 8:00 AM and 8:00 PM. Start Date: 08/07/2024. 01/12 8:00 AM, 02/03 8:00 PM, 02/04 8:00 AM, 02/04 8:00 PM - MAR was blank This pattern continued through the remainder of his/her medications. On 02/20/2025 at 10:25 AM, Surveyor emailed Manager A and defined concerns with the resident MARs. On 02/20/2025 at 12:03 PM, Manager A emailed Surveyor and stated that staff would be re-educated in proper medication administration documentation. Cross Reference: M0582 DHS 88.10(3)(q) Medications	{M 466}		

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{M 474}	88.07(4)(c) FOOD PREPARED AND STORED SANITARY WAY Food shall be prepared and stored in a sanitary manner. This Rule is not met as evidenced by: Based on observation and interview, the provider did not store food under sanitary conditions. Surveyor found food items in the refrigerator that were not properly sealed to avoid contamination and food items in the pantry that were past there 'Best By' date. The provider did not implement a system to identify when opened food was to be discarded for the prevention of food borne illnesses. This deficiency is being cited for a third time. See Statement of Deficiency (SOD) Q1E313, dated 08/19/2024, and Q1E314, dated 11/12/2024. Findings include: "Food safety refers to the conditions and practices that preserve the quality of food to prevent contamination and food-borne illnesses." (Source: USDA (US Department of Agriculture) website, What does food safety mean?, October 01, 2024, https://ask.usda.gov/s/article/What-does-food-safety-mean (retrieval date: February 20, 2025).) The licensee can serve up to 4 residents within the client groups of Physically Disabled, Irreversible Dementia/Alzheimer's, Alcohol/Drug Dependent, Developmentally Disabled, Terminally Ill, and Traumatic Brain Injury.	{M 474}		

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{M 474}	Continued From page 6 On 02/19/2025, at approximately 2:10 PM, Surveyor toured the kitchen with Licensee D and observed the following: Refrigerator: -(2) hotdogs sitting halfway into a plastic bag and half exposed. They were also not dated. -A glass pan with what appeared to be a cake that had a piece of paper toweling on top of it that did not securely cover the pan to prevent the cake from drying out. -An opened 3-pound package of hotdogs, placed in a plastic Ziploc bag, with a 02/08/2025 date written on it. Pantry: -A 16 ounce box of confectioners sugar that had a 'Best By' date of 12/07/2023. -A box of fat-free angel food cake mix that had a 'Best By' date of 07/18/2022. -A box of super moist white cake mix that had a 'Best By' date of 09/14/2022 Licensee D stated that DHS Chapter 88 did not define food safety. Surveyor noted there was limited food in the refrigerator, freezer and pantry. On 02/20/2025 at 9:27 AM, Surveyor emailed Manager A requesting the last two weeks of menus. On 02/20/2025 at 9:44 AM, Manager A emailed the following menu: 02/19/2025 - Breakfast: 1 cup ham, egg and cheese casserole, ½ cup fresh fruit, ½ cup 100% juice, 1 fresh biscuit. Lunch: 1 cup baked ziti, ½ cup assorted fruit, ½ cup roasted asparagus, 1	{M 474}		

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{M 474}	Continued From page 7	{M 474}		

garlic breadstick. Dinner: 3 ounce honey mustard pork, ½ cup roasted sweet potatoes, ½ cup green beans, ½ cup ice cream.
02/20/2025 - Breakfast: 1 bagel and cream cheese, 1 egg of choice, ½ cup fresh fruit, ½ cup 100% juice. Lunch: ½ turkey club sandwich, ½ cup ambrosia, 1 cup vegetable sticks. Dinner: 3 ounce beef patty with mushroom sauce, 1 baked potato, ½ cup lemon glazed carrots, 1 baked roll, ½ cup berry buckle cake.
02/21/2025 - Breakfast: Bacon egg muffin, ½ cup hash browns, ½ cup fresh fruit, ½ cup 100% juice. Lunch: 3 ounce chicken tenders, ½ cup applesauce, ½ cup sauteed yellow squash, 10 tater tots. Dinner: 3 ounce turkey with pan gravy, ½ cup mashed red potatoes, ½ cup brussel sprouts, 1 baked roll, 1 pumpkin chocolate chip cookie.

"Time/temperature control for safety (TCS) guidelines indicate food prepared in a food establishment and held longer than a 24 hour period shall be marked to indicate the date or day by which the food is to be consumed on the premises, sold, or discarded when held at a temperature of 5°C (41°F) or less for a maximum of 7 days. The day of preparation shall be counted as Day 1. Refrigerated, RTE (ready-to-eat)/TCS food prepared and packaged by a food processing plant shall be clearly marked, at the time the original container is opened in a food establishment and if the food is held for more than 24 hours, to indicate the date or day by which the food shall be consumed or discarded." (US Food and Drug Administration (FDA) Food Code, 2022, Section 3-501.17)

"Ready-to-eat TCS food (foods that need time and temperature control for safety) can be stored for only seven days if it is held at 41 degrees

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{M 474}	Continued From page 8 Fahrenheit or lower. The count begins on the day the food was prepared or a commercial container was open. TCS foods includes milk and dairy products, eggs, meat (beef, pork, and lamb), poultry, fish, shellfish and crustaceans, baked potatoes, tofu or other soy protein, sprouts and sprout seeds, sliced melons, cut tomatoes, cut leafy greens, untreated garlic-and-oil mixtures, and cooked rice, beans, and vegetables." (ServSafe Coursebook, 7th edition, 2017, p. 1-7, p. 1-8, and p. 7-3) "If there is no product date, hot dogs can be safely stored in the unopened package for 2 weeks in the refrigerator; once opened, only 1 week. For maximum quality, freeze hot dogs no longer than 1 or 2 months." (Source: USDA website, Food Safety Guidelines, February 10, 2025, https://www.fsis.usda.gov/food-safety/safe-food-handling-and-preparation/meat-catfish/hot-dogs-food-safety#:~:text=Food%20Safety%20Guidelines&text=If%20there%20is%20no%20product,than%201%20or%202%20months. (retrieval date - February 20, 2025).)	{M 474}		
{M 582}	88.10(3)(q) Medications Medications. To receive all prescribed medications in the dosage and at the intervals prescribed by the 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.	{M 582}		

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{M 582}	Continued From page 9	{M 582}		

This Rule is not met as evidenced by:
Based on observation, record review, and interview, the provider did not ensure 2 of 3 residents received all prescribed medications.

This deficiency is being cited for a fifth time. See Statement of Deficiency (SOD) Q1E311, dated 11/08/2022, SOD Q1E312, dated 10/04/2023, SOD Q1E313, dated 08/19/2024, and Q1E314, dated 11/12/2024.

Resident 2's Methadone (Opioid Use Disorder [OUD] medication), Linzess (constipation medication) and Spiriva (inhaler) were not administered as prescribed.
Resident 3's Rybelsus (diabetes medication) was not administered as prescribed.

Findings include:

On 02/19/2025, at approximately 2:30 PM, Surveyor and Licensee D observed Resident 3's and Resident 4's medications in the med closet. Surveyor requested a copy of each resident's MAR. Licensee D stated the Surveyor would have to obtain those from Manager A.

On 02/19/2025 at 2:57 PM, Surveyor requested the records from Manager A.

On 02/20/2025, Surveyor reviewed Resident 3's and Resident 4's January and February MARs, dated 01/11/2025 to 02/19/2025, which documented:

Example 1: Resident 1

Resident 1 moved into the home on 03/13/2021.

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{M 582}	Continued From page 10 On 02/19/2025, at approximately 2:30 PM, Surveyor and Licensee D observed Resident 1's box of Spiriva capsules. The box had a handwritten open date of 01/29/2025 written on it and there were 12 out of 30 capsules remaining. Resident 1's MARs documented: "Spiriva Handihaler - inhale contents of 1 capsule via Handihaler in the morning. Scheduled at 8:00 AM. Start Date: 07/22/2024." 01/29 - Was documented as not administered Based on the MARs, with a start date of 01/30/2025 through 02/19/2025, the medication was documented as administered 21 times. There should have been only 9 capsules remaining. On 02/19/2025, at approximately 2:30 PM, Surveyor and Licensee D observed Resident 1's bottle of Linzess. The bottle had a handwritten open date of 01/22/2025 written on it and there were 4 out of 30 capsules remaining. Resident 1's MARs documented: "Linzess - Take 1 capsule by mouth in the morning before breakfast. Start Date: 07/23/2024." Based on the MARs, with a start date of 01/22/2025 through 02/19/2025, the medication was documented as administered 29 times. There should have been only 1 capsule remaining. On 02/19/2025, at approximately 2:30 PM, Surveyor and Licensee D observed Resident 1's blister cards of Methadone. The AM blister card had 1 tablet remaining; The Noon blister card had 3 tablets remaining; The HS blister card (4:00 PM) had 4 tablets remaining; The PM blister card	{M 582}		

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{M 582}	Continued From page 11 (8:00 PM) had 3 tablets remaining. Surveyor noted there were two blister cards for each time frame, but the provider was only utilizing one, meaning 2 tablets would have to be dispensed with each administration time. Resident 1's MAR documented: "Methadone 10 MG (milligram) - Take 2 tablets (20 MG) by mouth 4 times a day. Scheduled at 8:00 AM, 12:00 PM, 4:00 PM and 8:00 PM. Start Date: 02/06/2025." Based on the MAR: The AM blister card originally had 29 tablets which would equal 14 ½ doses. The MAR documented all administration times had been completed. The medication should have been gone after 02/14/2025. The Noon blister card originally had 29 tablets which would equal 14 ½ doses. The MAR documented that the dose was not administered on 02/18. The medication should have been gone after 02/14/2025. The HS blister card (4:00 PM) originally had 30 tablets which would equal 15 doses. The MAR documented all administration times had been completed. The medication should have been gone after 02/15/2025. The PM blister card (8:00 PM) originally had 30 tablets which would equal 15 doses. The MAR documented all administration times had been completed. The medication should have been gone after 02/15/2025. Example 2: Resident 3 On 02/19/2025, at approximately 2:30 PM, Surveyor and Licensee D observed Resident 3's empty bottle of Rybelsus and a full bottle that had not been opened. Surveyor asked Licensee D when the last dose of the Rybelsus had been	{M 582}		

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{M 582}	Continued From page 12 administered. Licensee D stated, "This morning." Surveyor noted the bottle stated it originally contained 30 tablets. Resident 3 was admitted to the facility 08/27/2021. Resident 3's MARs documented: Rybelsus *BULK* 14 MG - Take 1 tablet by mouth in the morning. Scheduled at 8:00 AM. Start Date: 06/19/2024: 01/13 - Other 01/14 - Reordered - Waiting to come 01/15 - Out of building (Surveyor noted resident received other 8AM scheduled medications). 01/16 - Out of building (Surveyor noted resident received other 8AM scheduled medications). 01/17 - Other 01/18 - Documented as administered 01/23 - Out of building 02/04 - MAR was left blank 02/16 - Out of building (Surveyor noted resident received other 8AM scheduled medications). 02/19 - Out of building (Surveyor noted resident received other 8AM scheduled medications). On 02/20/2025 at 10:25 AM, Surveyor emailed Manager A and asked for a rationale as why resident medications were not reordered in a timely manner. On 02/20/2025 at 1:20 PM, Surveyor emailed Manager A and asked when Resident 3's bottle of Rybelsus was started. On 02/20/2025 at 1:42 PM, Manager A emailed Surveyor and stated 01/19/2025. Surveyor did not receive a response regarding the timely ordering of resident medications.	{M 582}		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018097	A. BUILDING: _____ B. WING _____	R-C 02/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COMMUNITY LIVING OF BROOKFIELD LLC	460 LEANORE LANE BROOKFIELD, WI 53005

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{M 582}	Continued From page 13 Based on the MAR, with a start date of 01/19/2025, minus the dates that were coded as not administered, there were 28 or 29 med administration opportunities. There should have been one or two tablets left in the bottle. On 02/20/2025 at 10:25 AM, Surveyor emailed Manager A and defined concerns with the resident MARs and medications. On 02/20/2025 at 12:03 PM, Manager A emailed Surveyor and stated that staff would be re-educated in proper medication administration and documentation. Cross Reference: M0466 DHS 88.07(3)(e)1. Medication - Record Keeping	{M 582}		