

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0014202	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/30/2025
NAME OF PROVIDER OR SUPPLIER BASCOM HALL		STREET ADDRESS, CITY, STATE, ZIP CODE 111 OWEN RD MONONA, WI 53716		
(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 07/30/2025, Surveyor conducted an abbreviated survey at Bascom Hall. One deficiency was identified. Census: 24	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 The CBRF shall develop and implement a policy for disposing unused, discontinued, outdated, or recalled medications in compliance with federal, state and local standards or laws.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 ensure medications that had been changed, discontinued, or expired were removed	N 406		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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N 406	Continued From page 1 from the medication cart and disposed of within 30 days. Findings include: On 07/30/2025 at 10:03 AM, Surveyor toured the provider's PRN (as needed) medication cart with Caregiver B. The following was observed: -Resident 1's daily dose packs of Guaifenesin 400 mg PRN with an expiration date of 06/30/2024, contained 29 pills. -Resident 2's daily dose packs of Hyoscyamine 12 mg PRN with an expiration date of 07/31/2024, contained 10 pills. -Resident 3's daily dose packs of Loperamide 2 mg PRN with an expiration date of 05/17/2025, contained 27 pills. -Resident 4 discharged on 11/26/2024. Resident 4's Bisacodyl 10 mg PRN suppositories, contained 10 doses. On 07/30/2025 at 10:10 AM, Surveyor interviewed Caregiver B regarding the expired medications. Caregiver B reported it was the responsibility of all staff to check the medication carts for expired medications. On 07/30/2025 at 10:50 AM, Surveyor interviewed Director of Quality C regarding the expired medications. Director of Quality C reported s/he was unaware the provider was using a separate medication cart for PRN medications. Director of Quality C stated s/he would work with the provider's director of nursing to ensure compliance with expired medications.	N 406		