

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 525395	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/05/2020
NAME OF PROVIDER OF SUPPLIER EPIONE PAVILION		STREET ADDRESS, CITY, STATE, ZIP 808 S WASHINGTON ST CUBA CITY, WI 53807	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0758 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>Based on record review and interview, the facility did not ensure drug regimens are free from unnecessary [MEDICAL CONDITION] medications for 1 of 5 residents (R16) reviewed for unnecessary medications out of a total sample of 19. R16 has [DIAGNOSES REDACTED]. This is evidenced by: The facility policy titled [MEDICAL CONDITION] Medication Use and Mood and Behavior Monitoring, undated, states, in part: . Procedure: I. A. Mood and/or behavior symptoms will be tracked and documented for all residents with abnormal/maladaptive mood and/or behaviors and for all residents receiving antipsychotic medications to assist in determining the frequency and intensity of behaviors. III. A. Antipsychotic Medications. 1. The use of antipsychotic medications is not approved for use with dementia behaviors and carries a risk of death. 3. The BMT (Behavior Monitoring Team) will document on the behaviors to show. d. The behaviors are persistent. R16 was admitted to the facility, on 7/3/19, with [DIAGNOSES REDACTED]. R16's Mood and Behavior charting, from 1/7/20 - 3/1/19, R16 refused medications 14 times. 1/1/20 - Wandering/Pacing wandering throughout unit-no attempts to leave. 1/6/20 - Exit seeking x1, with wandering. 1/8/20 - Resident opened door at end of hallway. Did not exit building and easily redirected. 1/13/20 - Entered peers room to use the bathroom [ROOM NUMBER]/16/20 - Combative with cares. Attempted to squeeze staff members arm and attempted to hit another staff member when assisting to room. Wandering/Pacing throughout the shift, setting off door alarm x1. 1/27/20 - Wandering/Pacing walking about unit as per usual, attempted to enter 2 peers rooms, but staff witnessed and redirected with some difficulty. Peer was ambulating from her room to a chair using her assigned walker. R16 grabbed the handles of the walker several times while peer was walking and shook the walker. Very difficult to redirect. Raised hand to staff member trying to redirect him during interaction. 2/7/20 - Wandering/Pacing resident wandering on unit. Resident entering other residents room uninvited. [DATE] - Wandering/Pacing resident wandering around the halls, looking into other resident's rooms but not entering them. 2/13/20 - Wandering/Pacing. Entered at least 3 peers rooms this evening that were bothered by his behaviors, all three yelled get out' multiple times. As a peer was attempting to transfer from w/c (wheelchair) to toilet, resident placed hands on handles of w/c and physically lifted the rear wheels of the w/c. Peer was unaffected as she was mid transfer as he lifted and wasn't aware. 2/14/20 - Combative with cares. 2/16/20 - Combative with cares. R16 was very angry with staff during cares. R16 was washed but shower not given. Did not want to sit down during breakfast and attempted to hit one of the staff. 2/26/20 - Exit seeking, opened door at end of hall but did not go out of the building 2/28/20 - Wandering/Pacing. Wandering in other rooms on the unit after supper 2/29/20 - Resident attempted to enter rooms of peers and peers were affected by his actions 3/1/20 - Refused medications. (Note: There is no documentation indicating R16 is experiencing any hallucinations.) R16's Physician order [REDACTED]. [MEDICATION NAME] 25mg po BID (twice a day) 8:00 AM and 2:00 PM for Hallucinations. R16's Physician order [REDACTED]. R16's care plan does not indicate or address the use of an antipsychotic medication. On 3/4/20 at 1:24 PM, Surveyor interviewed CNA C (Certified Nursing Assistant). Surveyor asked CNA C if R16 had persistent behaviors. CNA C stated, No. Surveyor asked if resident behaviors were harmful to himself or others. CNA C stated, No and I don't think there is anything harmful with regards to his behaviors. On 3/4/20 at 1:24 PM, Surveyor interviewed CNA D. Surveyor asked CNA D if R16 had persistent behaviors. CNA D stated, No. Surveyor asked if resident behaviors were harmful to himself or others. CNA D stated, Not really, he can get combative with cares at times. On 3/4/20 at 1:32 PM, Surveyor interviewed RN E (Registered Nurse). Surveyor asked RN E if R16 had persistent behaviors. RN E stated, R16 can be restless and he does wander. I think it happens on every shift. Surveyor asked RN E if R16 behaviors were harmful to himself or others. RN E stated, No. On 3/4/20 at 1:36 PM, Surveyor interviewed LPN F (Licensed Practical Nurse). Surveyor asked LPN F if R16 had persistent behaviors. LPN F stated, He wanders. Surveyor asked LPN F if R16's behaviors were harmful to himself or others. LPN F stated, No, he is easily redirected. On 3/4/20 at 2:45 PM, Surveyor interviewed Activities Aide G. Surveyor asked Activities Aide G if R16 has persistent behaviors. Activities Aide G stated, No. Surveyor asked Activities Aide G if R16's behaviors are harmful to himself or others. Activities Aide G stated, No. On 3/4/20 at 2:51 PM, Surveyor interviewed DON B (Director of Nursing). Surveyor asked DON B if R16 has persistent behaviors. DON B stated, I would say they have improved but I can't say for sure unless I look at his documentation. Yes, he consistently has behaviors. Surveyor asked DON B what behaviors R16 experiences. DON B stated, Aggression with redirection from staff, wandering, pacing and hallucinations. Surveyor asked DON B if there was any documentation of hallucinations for R16. DON B stated, No, I noticed that when I gave you his behavior documentation. Surveyor asked DON B if R16's behaviors were harmful to himself or others. DON B stated, They have not been but they could be. If he was trying to leave and became unable to redirect he could fall and harm himself. Surveyor asked DON B if she was able to identify the reason R16's [MEDICATION NAME] was increased in February. DON B stated, No. The facility failed to ensure that R16's drug regime was free from unnecessary [MEDICAL CONDITION] medications.</p> <p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>Based on observation, interview and record review the facility did not ensure drugs and biologicals used were stored in accordance with currently accepted professional principles for 1 of 2 medication rooms observed with the potential to affect approximately 29 residents served from this medication room. The medication refrigerator temperature logs were incomplete and vaccines were observed in the refrigerator. Evidenced by: The Medication Storage - 3.03 policy, with an effective date of 5/1/06, states, in part: Procedure: .6. Medications are to be stored at proper temperatures .Medications requiring refrigeration shall be stored at a temperature of not less than 2 C (36 F) or more than 8 C (46 F) .The temperature in the refrigerator is checked and documented every day on the night shift. On 3/3/20 at 1:42 PM, Surveyor and RN H (Registered Nurse) observed the facility's Oak Hall medication room and reviewed the refrigerator temperature log. Instructions state: Refrigerators containing vaccines must be monitored twice daily for appropriate temperatures. Place your initials in the row signifying the temperature under the date for that day . 1. a. Temperature log review dated</p>		
F 0761 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>Based on observation, interview and record review the facility did not ensure drugs and biologicals used were stored in accordance with currently accepted professional principles for 1 of 2 medication rooms observed with the potential to affect approximately 29 residents served from this medication room. The medication refrigerator temperature logs were incomplete and vaccines were observed in the refrigerator. Evidenced by: The Medication Storage - 3.03 policy, with an effective date of 5/1/06, states, in part: Procedure: .6. Medications are to be stored at proper temperatures .Medications requiring refrigeration shall be stored at a temperature of not less than 2 C (36 F) or more than 8 C (46 F) .The temperature in the refrigerator is checked and documented every day on the night shift. On 3/3/20 at 1:42 PM, Surveyor and RN H (Registered Nurse) observed the facility's Oak Hall medication room and reviewed the refrigerator temperature log. Instructions state: Refrigerators containing vaccines must be monitored twice daily for appropriate temperatures. Place your initials in the row signifying the temperature under the date for that day . 1. a. Temperature log review dated</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE		TITLE (X6) DATE	

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 0761 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>(continued... from page 1)</p> <p>(NAME)2020 - Initials are present under night shift for 3/3/20 only. All other dates are blank for night and pm shifts. b. February 2020 - Initials are present under night shift for the following dates: a) 2/1/20; 2/2/20; 2/4/20; [DATE] - 2/10/20; 2/14/20; 2/18/20 - 2/22/20; 2/25/20; 2/27/20 - 2/29/20. Initials are present under pm shift for the following dates: 2/15/20; 2/16/20; and 2/22/20. All other dates are blank for night and pm shifts. 2. Three boxes of Influenza vaccine were noted to be in the refrigerator. Two boxes were labeled Employees and one box was labeled Residents. The box labeled Residents contained 4 prefilled syringes. Surveyor asked RN H if the temperatures for the refrigerator should be checked daily. RN H stated, yes, it's not very consistent. Surveyor asked RN H who is responsible for checking the refrigerator temperatures. RN H stated, the nurses. RN E, who identified herself as a Charge Nurse, was asked by RN H to assist with questions. Surveyor asked RN E how often the refrigerator temperatures should be taken. RN E stated, depending on the month different shifts may be assigned, for February and (NAME)it was assigned to PM and Night shifts. Surveyor asked RN E if she would expect the logs to be completed for both shifts on a daily basis. RN E stated, Correct. Surveyor asked RN E who is responsible for ensuring the temperatures are taken and logged. RN E stated, any of the nurses. On 3/5/20 at 12:17 PM, Surveyor interviewed DON B (Director of Nursing) and asked how often the medication refrigerator temperatures should be checked. DON B stated, Twice a day. Surveyor showed DON B the refrigerator logs from the Oak Hall Medication Room for February 2020 and (NAME)2020 and asked DON B if she would expect the medication refrigerator to be checked and documented completely. DON B stated, Yes.</p>		