

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 08/27/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 525276	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/25/2026
NAME OF PROVIDER OR SUPPLIER Complete Care at Maple Grove LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 3401 Maple Grove Dr. Madison, WI 53719	
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 0760 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure that residents are free from significant medication errors. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility did not ensure Residents are free of significant medication errors for 1 of 10 sampled Residents (R3) Facility staff did not administer R3's scheduled Parkinson's medications as ordered. Findings include: Review of the package insert, Sinemet CR, dated 03/2020, and located at https://mohpublic.z6.web.core.windows.net/IsraelDrugs/Rishum_14_228460120.pdf, indicated, Always take SINEMET CR exactly as instructed by your doctor. Take them at regular time intervals according to your doctor's instructions. Do not change the times at which you take your tablets. You should not take SINEMET CR tablets at intervals of less than 4 hours apart. If you forgot to take SINEMET CR at the specified time do not take a double dose to make up for a forgotten dose. Resume your regular dosing schedule and consult the doctor. Review of the manufacturer [NAME] Pharmaceuticals access data, Sinemet CR, located on the FDA website, revised 07/2014, and located at https://www.accessdata.fda.gov/drugsatfda_docs/label/2014/019856s016s024s028lbl.pdf, indicated, . SINEMET CR contains. 25 mg of carbidopa and 100 mg of levodopa in a sustained-release dosage form designed to release these ingredients over a 4- to 6-hour period. The interval between doses of SINEMET [carbidopa-levodopa] CR should be 4-8 hours during the waking day. Review of the facility's policy titled, Medication Administration, dated 01/26, indicated, . Ensure the six rights of medication administration are followed: right resident, right drug, right dosage, right route, right time, and right documentation . Administer within scheduled shift until otherwise ordered by physician. Review of the facility policy titled, Medication Errors, dated 01/26, indicated, . Definitions: 'Medication error' means the observed or identified preparation or administration of medications or biologicals which is not in accordance with the prescriber's order; manufacturer's specifications (not recommendations) regarding the preparation and administration of the medication; or accepted professional standards and principles which apply to professionals providing services. The facility shall ensure medications will be administered as follows: according to physician's orders. Review of R3's Census located under the Census tab of the electronic medical record (EMR) revealed R3 was admitted to the facility on [DATE]. Review of R3's Medical Diagnosis located under the Med Diag tab of the EMR reviewed R3 had diagnoses of polymyalgia rheumatica, inflammatory spondylopathy, Parkinson's Disease, Alzheimer's Disease, restless legs syndrome, ankylosing hyperostosis, major depressive disorder, and anxiety disorder. (continued on next page)		

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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F 0760 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Review of R3's quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 05/18/26 and located under the MDS tab of the EMR, revealed R3 had a Brief Interview for Mental Status (BIMS) score of 15 out of 15, which indicated R3 was cognitively intact. During an interview on 06/24/25 at 10:25 AM, R3 stated, I don't get my Parkinson's medications on time. The doctor said my medications need to be on time. Sometimes they are about an hour late. Review of R3's Orders located under the Orders tab of the EMR revealed R3 had a physician's order for Carbidopa-Levodopa [a Parkinson's medication] ER [extended release] 25-100 mg [milligrams] give one tablet by mouth every six hours for Parkinson's Disease. Swallow whole; do not break, chew, or crush tablet, which originated 07/03/25. Review of R3's Medication Administration Record (MAR), dated December 2025 and located under the Orders tab of the EMR, revealed Carbidopa-Levodopa was scheduled for administration at 5:00 AM, 11:00 AM, 5:00 PM, and 11:00 PM. Review of the Medication Admin Audit Report, dated 12/01/25 through 12/15/25 and provided by the facility, revealed the above medication was administered late on the following dates and times: 12/01/25 &ndash; The 11:00 AM dose of Carbidopa-Levodopa was not administered until 1:06 PM. The 5:00 PM dose of Carbidopa-Levodopa was administered at 8:12 PM. The 11:00 PM dose of Carbidopa-Levodopa was administered at 5:05 AM, resulting in a double dose of Carbidopa-Levodopa on 12/02/25 at 5:05 AM 12/02/25 &ndash; The 11:00 AM doses of Carbidopa-Levodopa was administered at 1:05 PM. 12/07/25 &ndash; The 11:00 PM doses of Carbidopa-Levodopa was given at 4:32 AM 12/08/25 &ndash; The 11:00 AM doses of Carbidopa-Levodopa was given at 1:16 PM. The 11:00 PM dose of Carbidopa-Levodopa was given at 12:24 AM. 12/09/25 &ndash; The 11:00 AM doses of Carbidopa-Levodopa was given at 12:25 PM. The 11:00 PM dose of Carbidopa-Levodopa was given at 1:02 AM. 12/12/25 &ndash; The 11:00 AM doses of Carbidopa-Levodopa was given at 2:06 PM. The 11:00 PM dose of Carbidopa-Levodopa was given at 12:18 AM 12/13/25 &ndash; The 5:00 AM doses of Carbidopa-Levodopa was given at 7:00 AM. 12/14/25 - The 11:00 AM doses of Carbidopa-Levodopa was given at 12:15 PM. 12/15/26 &ndash; The 11:00 AM dose of Carbidopa-Levodopa was given at 1:51 PM. The 5:00 PM dose of Carbidopa-Levodopa was given at 6:24 PM. Review of R3's Medication Administration Record (MAR), dated June 2026 and located under the Orders tab of the EMR, revealed Carbidopa-Levodopa was scheduled for administration at 5:00 AM, 11:00 AM, 5:00 PM, and 11:00 PM. Review of the Medication Admin Audit Report, dated 06/07/26 through 06/24/26 and provided by the (continued on next page)		

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F 0760 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	facility, revealed the above medication was administered late on the following dates and times: 6/12/26 &ndash; The 11:00 PM dose of Carbidopa-Levodopa was given at 3:37 AM 6/15/26 &ndash; The 11:00 PM dose of Carbidopa-Levodopa was given at 12:40 AM. 6/16/26 &ndash; The 11:00 AM dose of Carbidopa-Levodopa was given at 12:19 PM. 6/18/26 &ndash; The 11:00 PM dose of Carbidopa-Levodopa was given at 2:35 AM. During a medication administration observation and interview on 06/24/26 at 10:50 AM, Licensed Practical Nurse (LPN) 3 stated, Scheduled medications need to be given within one hour before or one hour after the scheduled time. I don't know if a dose scheduled for 11:00 AM and administered at 2:00 PM would be a medication error. I would have to review the policy. I don't know if there are any risks associated with Carbidopa-Levodopa being administered late or if two doses were administered at same time. During an interview on 06/25/26 at 3:30 PM, the Director of Nursing (DON) stated, Medications are administered and she [R3] forgets and calls her daughter. For scheduled medications, we try to administer medications within one hour before or after the scheduled time. I'm not sure if this is a medication error, I would have to review the policy. I don't know if there are any risks associated with not administering carbidopa/levodopa as ordered.Review of the National Library of Medicine article, Delayed Administration and Contraindicated Drugs Place hospitalized Parkinson's Disease Patients at Risk, dated 01/2018, and located at https://pmc.ncbi.nlm.nih.gov/articles/PMC5737245/, indicated, Inpatients with Parkinson's disease require precise medication management. Patients with Parkinson's disease require strict adherence to an individualized, timed medication regimen of antiparkinsonian agents. Dosing intervals are specific to each individual patient because of the complexity of the disease. When medications are not administered on time and according to the patient's unique schedule, patients may experience an immediate increase in symptoms.2 Delaying medications by more than one hour, for example, can cause patients with Parkinson's disease to experience worsening tremors, increased rigidity, loss of balance, confusion, agitation, and difficulty communicating. Review of Kaiser Permanente's Carbidopa ER 25 mg-levodopa 100 mg tablet, extended release, dated 03/2026 and located at https://healthy.kaiserpermanente.org/health-wellness/drug-encyclopedia/drug.carbidopa-er-25-mg-levodopa-1 indicated, . Some patients may experience a wearing-off (worsening of symptoms) before the next dose is due. An on-off effect might also occur, in which sudden short periods of stiffness occur. If you miss a dose, take it as soon as you remember. If it is near the time of the next dose, skip the missed dose. Take your next dose at the regular time. Do not double the dose to catch up.		