STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	525418	A. Building B. Wing	09/17/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Evansville Manor Nursing and Rehab, LLC	470 Garfield Ave Evansville, WI 53536

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 0684 Level of Harm - Actual harm Residents Affected - Few	Provide appropriate treatment and care according to orders, resident's preferences and goals. (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 0684 Level of Harm - Actual harm Residents Affected - Few	**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility did not ensure that residents received treatment and care in accordance with professional standards of practice for 1 of 3 residents (R2) reviewed for medication errors. R2 received the wrong dose of a medication, and the facility failed to increase registered nurse (RN) assessments and update the provider timely when R2 had a change in condition.Evidenced by:The facility's policy titled Change in Condition last revised on 11/13/24, states in part .Procedure: 1. The physician and Durable Power of Attorney/responsible party will be notified when there has been a change that is sudden in onset, change that is a marked difference in usual sign/symptoms and/or the signs/symptoms are unrelieved by measures already prescribed: 2. Specific information that requires prompt notification include, but is not limited to: a. Significant change or instability of vital signs; .g. Change in level of consciousness; .k. A medication error or adverse reaction to medication; l. A significant change in the resident's physical/psychosocial/mental condition; .o. A need to transfer the resident to a hospital or treatment center; . 3. Nurse will complete assessment and document findings in resident record including but not limited to vital signs, pain, respiratory status as applicable, cardiac status as applicable, etc. Notification of medical professional and resident representative will be documented in medical record. 4. If the physician cannot be reached, the Medical Director will be notified to report the change in condition until the physician can be reached.According to Drugs.com, .The most commonly reported signs and symptoms associated with clozapine overdose are: sedation, delirium, coma, tachycardia, hypotension, respiratory depression or failure; and hypersalivation. There are reports of aspiration pneumonia, cardiac arrhythmias, and seizure. Clozaril: Package Insert / Prescribing Information.According to the Wisconsin Nurse Practice Act, N6.03(1), An R.N. (Registered Nurse) shall utilize the nursing process in the execution of general nursing procedures in the maintenance of health, prevention of illness or care of the ill. The nursing process consists of the steps of assessment, planning, intervention, and evaluation. This standard is met through performance of each of the following steps of the nursing process:(a) Assessment. Assessment is the systematic and continual collection and analysis of data about the health status of a patient culminating in the formulation of a nursing diagnosis.(b) Planning. Planning is developing a nursing plan of care for a patient which includes goals and priorities derived from the nursing diagnosis.(c) Intervention. Intervention is the nursing action to implement the plan of care by directly administering care or by directing and supervising nursing acts delegated to L.P.N. s (Licensed Practical Nurse) or less skilled assistants.(d) Evaluation. Evaluation is the determination of a patient's progress or lack of progress toward goal achievement which may lead to modification of the nursing diagnosis.R2 admitted to the facility on [DATE] with diagnoses that include urinary tract infection, chronic obstructive pulmonary disease (a group of lung diseases that block airflow and make it difficult to breathe), schizoaffective disorder (a mental health condition that includes schizophrenia (a disorder that affects a person's ability to think, feel, and behave clearly) and mood disorder symptoms), and chronic pain syndrome. R2's most recent Minimum Data Set (MDS) stated that R2 has a Brief Interview of Mental Status (BIMS) of 14 out of 15, indicating that R2 is cognitively intact.R2's hospital discharge orders dated 8/25/25 included:Clozapine 100mg oral tablet 1 tab(s) oral once a day (in the morning).Clozapine 200mg oral tablet 1 tab(s) oral once a day (at bedtime).8/25/25 at 4:31 PM nurse's note: NP (Nurse Practitioner) questioning clozapine dose due to hospital notes stating it wasn't in their formulary. Admissions director clarified with hospital that resident was not taking in the hospital. Writer called residents outside social worker to discuss. She gave writer [Nurse Name] who works with [Physician Name] who manages her psychotropic medications. Writer then spoke with [Nurse Name] who will send orders to [Pharmacy Name] to titrate dose of clozapine back up to home dose. This will start on 8/27.R2's new orders for clozapine (entered on 8/26/25 at 12:53 PM) is as follows: Clozapine oral tablet 25mg. Give 12.5 mg by mouth in the morning related to schizoaffective disorder for 2 days. Use pre- dosed pill packs supplied by resident psych MD (Medical Doctor), then give 25mg by mouth in the morning related to schizoaffective disorder for 2 days. Use pre-dosed pill packs supplied by resident psych MD. Then give 50mg by mouth in the morning related to schizoaffective disorder for 2 days. Use pre- dosed pill packs supplied by resident psych MD. Then give 75mg by mouth in the morning related to schizoaffective disorder for 2 days. Use pre- dosed pill packs supplied by resident psych MD. Then give 100mg by mouth in the morning related to schizoaffective disorder for 5 days. Use pre- dosed pill packs supplied by resident psych MD Clozapine oral tablet 25mg. Give 12

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F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist. Based on observation, interview, and record review, the facility did not provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of each resident for 1 of 4 residents (R5) reviewed for medications. R5 has medications that should not be crushed prior to administration. R5 received those medications crushed. R5 received an enteric coated medication when the medication should have been in a chewable form. This is evidenced by: The facility's policy Medication Error, dated 5/14/21, includes: All medication errors and drug reactions will be reported promptly to the licensed nurse, the attending physician, and will be documented according to established procedures. Medication error is defined as the preparation or administration of medications or biological that is not in accordance with the prescriber's orders, manufacturer specifications regarding the preparation and administration of the medication or biological and/or accepted professional standards for medication or biological administration. A detailed account of the error will be recorded on an incident report. Such documentation must include, but is not limited to: a. Time and date of the incident b. Name, strength, and dosage of medication administrated c. Resident's reaction to the medication d. Condition of the resident e. Any treatment administered f. Date and time the physician was notified and what instructions were given. The facility's Medications Not To Be Crushed form, dated 2002, includes: Aspirin enteric coated, Guaifenesin extended release, Bupropion extended release, Finasteride, Tamsulosin, and Omeprazole.Example 1On 10/30/25 at 8:30 AM, Surveyor observed LPN D (Licensed Practical Nurse) prepare R5's medications. Surveyor observed LPN D take an Aspirin enteric coated 81 mg tab out of the stock container and place it in the medication cup. LPN D placed Bupropion HCL ER (XL) 300 mg tablet, Finasteride 5 mg tablet, and Guaifenesin ER 600 mg tablet into the medication cup. LPN D proceeded to crush these medications. LPN D placed Omeprazole 20 mg capsule and Tamsulosin 0.4 mg capsule into another medication cup. LPN D opened both capsules and placed the medication inside the capsules into the medication cup with the other crushed medications. LPN D administered these medications to R5. Surveyor interviewed LPN D regarding the crushed medications. LPN D indicated she can crush and administer these medications because R5 has an order for crushed medications.Of note, R5 does not have a physician order to crush medications. R5's physician orders, printed 10/30/25, include:Aspirin Low Dose Oral Tablet Chewable 81 mg (milligrams) Bupropion HCL ER (extended release) (XL) Oral tablet extended release 24 hour 300 mg. DO NOT CRUSHFinasteride oral tablet 5 mg.DO NOT CRUSHGuaifenesin ER oral tablet extended release 12 hour 600 MGOmeprazole oral capsule delayed release 20 mg.DO NOT CRUSHTamsulosin GCL (Glyceryl trinitrate) oral capsule 0.4 mg.CAPSULES SHOULD BE SWALLOWED WHOLE-DO NOT CRUSH, CHEW OR OPENOn 10/30/25 at 9:56 AM, Surveyor interviewed LPN E regarding medication errors. LPN E indicated crushing a medication that should not be crushed is a medication error. LPN E indicated given a medication that is enteric coated when the order is for a chewable is a medication error.On 10/30/25 at 10:03 AM, Surveyor interviewed RN F (Registered Nurse) regarding medication errors. RN F indicated crushing extended-release medications is a medication error. RN F indicated opening capsules that should not be opened and dispensing the medication from inside is considered a medication error.On 10/30/25 at 11:39 AM, Surveyor interviewed DON B (Director of Nursing) regarding medication errors. DON B indicated crushing medications that are extended release is a medication error. DON B indicated extended-release medications should not be crushed. DON B indicated capsules should not be opened unless there is an order to open them.