STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	525528	A. Building B. Wing	12/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Franciscan Woods	19525 W North Ave Brookfield, WI 53045

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 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. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38146 Based on observation, interviews, 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 biological's, to meet the needs of each resident for 1 of 3 (R185) residents reviewed for medications. R185 did not receive an antibiotic as indicated on the hospital discharge summary. Findings include: R185 admitted to the facility on [DATE] with diagnoses that include small bowel obstruction, hypertension, acute kidney injury superimposed on chronic kidney disease, Failure to thrive, demand ischemia and Peripheral Artery Disease. R185 discharged to the hospital for a clogged gastrostomy tube on 11/11/24 and did not return to the facility. Surveyor asked DON (Director of Nursing)-B for a facility policy and procedure regarding admission orders and transcribing of orders. DON-B reported the facility did not have a policy related to admission orders or transcribing orders. DON-B provided Surveyor the facility policy titled Admission Criteria date last approved 6/22 which documents (in part) . Our community will admit only those residents whose medical and nursing care needs can be met. A. The objectives of our admission criteria policy are to: . 3. Address concerns of residents and families during the admission process. E. Prior to or at the time of admission, the resident's Attending Physician must provide the community with information needed for the immediate care of the resident, including orders covering at least: . 2. Medication orders, including (as necessary) a medical condition or problem associated with each medication. (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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	525528	A. Building B. Wing	12/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Franciscan Woods	19525 W North Ave Brookfield, WI 53045

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 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	On 12/23/24, at 10:15 AM, Surveyor spoke with R185's POA (Power of Attorney). R185's POA advised Surveyor the surgeon told her R185 was to continue the antibiotic for another course after he discharged from the hospital. She reported on the first night at the facility, the nurse (unknown name) confirmed the resident had an order for Ceftin. The next day when (POA) asked about the Ceftin, she was told by a different nurse that he didn't have an order. R185's POA advised Surveyor she spoke with DON (Director of Nursing)-B several times asking about the antibiotic but was told he did not come with orders for the antibiotic. R185's POA reported she told DON-B the surgeon said he was to continue the antibiotic for another week at the facility, but DON-B said, We're not just going to give him an antibiotic and nothing else was done. The POA advised Surveyor she expressed concern to facility staff regarding the antibiotic at least 3 times. Surveyor reviewed R185's Hospital Physician Discharge Summary dated 11/4/24. Surveyor noted although Ceftin was not listed on the medication list, the discharge summary documented (highlighted via bold letters) Surgical midline incision cellulitis/Leukocytosis - on Ceftriaxone IP, infection is healing nicely. Per Surgery continue Ceftin x 7 more days. Surveyor noted R185's Medication Administration Record did not include an order for Ceftin, and he did not receive the antibiotic while residing in the facility. On 12/23/24, Surveyor spoke with DON-B and asked if the facility follows Physician's orders from the Hospital Discharge Summary or the AVS (After Visit Summary). DON-B reported the facility transcribes orders from the Discharge Summary, not the AVS. Surveyor asked if it is the expectation the nurse reads the entire Hospital Discharge Summary. DON-B stated, The manager reads the whole thing and I always review it too. Most times orders come before resident's admit, so they can be reviewed and entered. Surveyor asked DON-B if she had any conversations with R185's POA regarding an antibiotic for R185. DON-B stated, Yes, she did call me asking about the antibiotic, but I looked at the Discharge Summary and he didn't have orders for an antibiotic. Surveyor showed DON-B the Hospital Discharge Summary which documented Per Surgery continue Ceftin x 7 more days. DON-B stated, I don't know, I just looked at the medication orders and didn't see an order for an antibiotic. Surveyor asked DON-B if, after R185's POA called expressing concern R185 was not receiving the antibiotic, did she or anyone call the doctor to clarify orders. DON-B stated, No because it wasn't on the medication orders. Surveyor confirmed with DON-B the expectation is for nursing to read the entire discharge summary, which included the order in bold per surgery continue Ceftin x 7 more days. Surveyor informed DON-B of the concern the facility did not call R185's Physician or surgeon to clarify the order and the antibiotic (Ceftin) was not transcribed or administered to R185 while he resided in the facility.