

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  525595	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/21/2025
NAME OF PROVIDER OR SUPPLIER  St Francis Home		STREET ADDRESS, CITY, STATE, ZIP CODE 33 Everett St Fond Du Lac, WI 54935	

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)
<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>40342</p> <p>Based on staff interview and record review, the facility did not report an allegation of misappropriation of contingency medication to the State Agency (SA). This had the potential to affect residents in the facility who may have needed contingency medications that were potentially diverted.</p> <p>On 1/11/25, the facility discovered missing doses of narcotic medication which raised the concern of potential drug diversion. The facility did not report the allegation of misappropriation to the SA.</p> <p>Findings include:</p> <p>The facility's Reporting Suspected Crimes Under the Federal Elder Justice Act, dated May 2020, indicates: It is the policy of this facility to a comply with the Elder Justice Act about reporting a reasonable suspicion of a crime under Section 1150B of the Social Security Act, as established by the Patient Protection and Affordable Care Act .Facilities are not required to report to either the State Survey Agency or local law enforcement under this act; only individuals are required to report. However, facilities may be required to report certain incidents under other federal, state, or local laws and regulations such as reporting to the SA abuse, neglect or misappropriation .</p> <p>On 4/21/25 at 10:09 AM, Surveyor interviewed Registered Nurse (RN)-D who was an agency nurse and worked at the facility part-time. RN-D indicated the nurse who worked on (a named hall) is the only nurse with a key to the facility's narcotic contingency medication. RN-D indicated if a narcotic medication is needed from the contingency box, two nurses call the pharmacy for permission. RN-D indicated this process changed after a big diversion which occurred around December 2024 in which almost the entire box of narcotics was missing. RN-D indicated contingency medications were moved to first floor during the process change.</p> <p>(continued on next page)</p>

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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<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 4/21/25 at 10:14 AM, Surveyor interviewed RN-E who indicated the new process started in December (2024) or January (2025) and includes checking the tag numbers and ensuring medication is in each compartment of the contingency box. RN-E indicated two nurses, one one each shift at shift change, complete the task. Surveyor observed RN-E open a cabinet in a locked medication room with a key from RN-E's pocket. RN-E indicated two nurses ensure the tag numbers on the box match the tag numbers written on the form and sign the form to verify it was checked and correct at shift change. Surveyor noted the contingency box was secured with two tags, one on each side. The box had an opaque see-through cover through which unit dose medications could be observed in individual compartments of the box. RN-E indicated the two nurses conduct a visual inspection of each compartment to ensure there are medications in each compartment but don't count the individual doses each shift. RN-E indicated if a medication is needed and the box is opened, the two nurses count the inventory of the box.</p> <p>On 4/21/25, Surveyor reviewed the facility's investigation which included a document titled Estimated Time form Discovery of Missing Controlled Substance II and Scheduled 2-5 Medications. The document indicated on 1/11/25 at 6:02 AM, staff called Director of Nursing (DON)-B and reported several medications were missing from the contingency box. The document indicated the contingency box was missing one 12 microgram (mcg) fentanyl (a narcotic medication used to treat severe pain) patch, five 15 mg morphine (a narcotic medication used to treat moderate to severe pain) IR (immediate release) tablets, five 15 mg morphine SR (sustained release) tablets, nine 5 mg oxycodone (a narcotic medication used to treat moderate to severe pain) tablets, ten 10 mg Oxycontin (a narcotic medication used to treat moderate to severe pain) ER (extended release) tablets, ten 5/325 mg hydrocodone/APAP (an opioid analgesic medication used to treat pain) tablets, and ten 10/325 mg hydrocodone/APAP tablets. The document indicated the facility contacted local law enforcement on 1/11/25 at approximately 8:30 AM. The document did not indicate the facility reported the potential allegation of misappropriation to the SA.</p> <p>On 4/21/25 at 2:37 PM, Surveyor interviewed Nursing Home Administrator (NHA)-A who verified the SA was not notified of the potential allegation of misappropriation that was discovered on 1/11/25.</p>		