

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195139	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/19/2025
NAME OF PROVIDER OR SUPPLIER Baton Rouge Gen Med Ctr, Snf		STREET ADDRESS, CITY, STATE, ZIP CODE 3600 Florida Blvd. Baton Rouge, LA 70806	

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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47732</p> <p>Based on observation, record reviews, and interviews, the provider failed to develop and implement a Comprehensive Person-Centered Care Plan to meet the needs of 4 (#1, #170, and #171, and #218) of 19 total sampled residents. The facility failed to:</p> <ol style="list-style-type: none"> 1. Ensure Residents #1, #170, #171 were care planned for anticoagulant medication; 2. Ensure Resident #1 was care planned for antidepressant medication; and 3. Ensure Resident #218 was care planned for indwelling foley catheter. <p>Findings:</p> <ol style="list-style-type: none"> 1. <p>Resident #1</p> <p>Review of Resident #1's Clinical Record revealed an admitted [DATE] with diagnoses, which included Major Depressive Disorder, Anxiety Disorder, Angina Pectoris, and Hypertension.</p> <p>Review of Resident #1's active Physician Orders revealed, in part, an order dated 03/13/2025 for Lovenox 30 mg/0.3 mL subcutaneously once daily.</p> <p>Review of Resident #1's March 2025 Medication Administration Record (MAR) revealed Resident #1 received Lovenox 30mg/0.3 mL on 03/14/2025 through 03/19/2025.</p> <p>Review of Resident #1's current Comprehensive Plan of Care revealed no developed care plan or interventions for anticoagulant medication.</p> <p>Resident #170</p> <p>Review of Resident #170's Clinical Record revealed an admitted [DATE], with diagnoses, which included Right Leg Pain, Unspecified Fall, and Back Pain.</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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of Resident #170's active Physician Orders revealed, in part, an order dated 03/04/2025 for Lovenox 40 mg/0.4 mL subcutaneously once daily.</p> <p>Review of Resident #170's March 2025 Medication Administration Record revealed Resident #170 had received Lovenox 40mg/0.4 mL on 03/04/2025 through 03/19/2025.</p> <p>Review of Resident #170's current Comprehensive Plan of Care revealed no developed care plan or interventions for anticoagulant medication.</p> <p>Resident #171</p> <p>Review of Resident #171's Clinical Record revealed an admitted [DATE], with diagnoses which included Diagnostic Heart Failure, Chronic Kidney Disease, and Presence of Artificial Hip Joint Bilaterally.</p> <p>Review of Resident #171's active Physician Orders revealed, in part, an order dated 03/04/2025 for Lovenox 30 mg/0.3 mL subcutaneously once daily.</p> <p>Review of Resident #171's March 2025 Medication Administration Record revealed Resident #171 had received Lovenox 30mg/0.3mL on 03/04/2025 through 03/19/2025.</p> <p>Review of Resident #171's current Comprehensive Plan of Care revealed no developed care plan or interventions for anticoagulant medication.</p> <p>2.</p> <p>Review of Resident #1's active Physician Orders revealed, in part, an order dated 03/13/2025 for Lexapro 20 mg by mouth daily.</p> <p>Review of Resident #1's March 2025 Medication Administration Record (MAR) revealed Resident #1 had received Lexapro 20 mg on 03/14/2025 through 03/19/2025.</p> <p>Review of Resident #1's current Comprehensive Plan of Care revealed no developed care plan or interventions for antidepressant medication.</p> <p>3.</p> <p>Review of Resident #218's Clinical Record revealed an admitted [DATE] with diagnoses, which included Chronic Kidney Disease and Retention of Urine.</p> <p>Review of Resident #218's active Physician Orders failed to reveal orders for indwelling foley catheter.</p> <p>Review of Resident #218's current Comprehensive Plan of Care revealed no developed care plan or interventions for indwelling foley catheter.</p> <p>Review of Resident #218's Physician's Progress Notes revealed, in part, the following:</p> <p>(continued on next page)</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 03/14/205, Chief Complaint/Clinical Background</p> <p>Resident #218 developed urinary retention and acute cystitis, and had a Foley catheter placed by Urology.</p> <p>Recent Acute Urinary Retention, complicated Cystitis without Hematuria:</p> <p>Resident #218 developed Urinary Retention after her fracture, prior to hospitalization and had foley catheter placed by Urology. Foley catheter to remain in place follow-up with Urology.</p> <p>On 03/18/2025, Plan</p> <p>Acute Urinary Tract Infection while completed antibiotic course. Asymptomatic. Foley placed.</p> <p>On 03/17/2025 at 9:40 a.m., an observation was made of Resident #218. Resident #218 was observed having an indwelling foley catheter.</p> <p>On 03/18/2025 at 10:41 a.m., an observation was made of Resident #218. Resident #218 was observed having an indwelling foley catheter.</p> <p>On 03/18/2025 at 1:32 p.m., an interview was conducted with S2DON. S2DON stated as a resident was admitted the Admit registered nurse would initiate the care plan from admitting diagnoses and problems. She stated all floor nurses were responsible for care plans. S2DON stated care plans were reviewed every shift by the floor nurse and a registered nurse reviewed a report daily to ensure the care plans were reviewed. S2DON further stated there was no one specifically going into the care plans to ensure the nurses' intervention were accurate. S2DON stated as floor nurses identified any problems or concerns they were expected to add the problem and interventions to the care plan when they were reviewing the resident's care plan every shift. S2DON confirmed a resident should be properly care planned with interventions for anticoagulants, antidepressants, and indwelling foley catheters. S2DON reviewed Residents #1, #170, and #171's current Comprehensive Plan of Care, and confirmed residents were care planned for anticoagulant medications. S2DON further confirmed Resident #1 was not care planned for antidepressant medication. S2DON reviewed Residents #218's current Comprehensive Plan of Care, and confirmed she was not properly care planned for indwelling foley catheter, and should have been.</p> <p>48912</p>

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<p>F 0732</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Many</p>	<p>Post nurse staffing information every day.</p> <p>39121</p> <p>Based on observations and interviews, the facility failed to ensure nurse staffing data requirements were posted. This deficient practice had the potential to affect any of the 19 residents residing in the facility.</p> <p>Findings:</p> <p>On 03/17/2025 at 11:14 a.m., an observation was made of the staff posting sheet titled Report of Nursing Staff Directly Responsible For Resident Care dated 03/17/2025. Review of the staff posting sheet revealed no documentation of the facility census nor the actual hours worked for nursing staff.</p> <p>On 03/18/2025 at 8:31 a.m., an observation was made of the staff posting sheet titled Report of Nursing Staff Directly Responsible For Resident Care dated 03/18/2025. Review of the staff posting sheet revealed no documentation of the facility census nor the actual hours worked for nursing staff.</p> <p>On 03/18/2025 at 1:54 p.m., an interview was conducted with S4RN. S4RN reviewed and confirmed the staff posting sheet titled Report of Nursing Staff Directly Responsible For Resident Care dated 03/17/2025 and 03/18/2025 did not contain the facility census nor the actual hours worked for nursing staff.</p> <p>On 03/18/2025 at 2:16 p.m., an interview was conducted with S2DON. S2DON reviewed and confirmed the staff posting sheet titled Report of Nursing Staff Directly Responsible For Resident Care dated 03/17/2025 and 03/18/2025 did not contain the facility census nor the actual hours worked for nursing staff.</p> <p>On 03/18/2025 at 2:34 p.m., an interview was conducted with S1DIR. S1DIR reviewed and confirmed the staff posting sheet titled Report of Nursing Staff Directly Responsible For Resident Care dated 03/17/2025 and 03/18/2025 did not contain the facility census nor the actual hours worked for nursing staff.</p>

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<p>F 0757</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure each resident's drug regimen must be free from unnecessary drugs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47732</p> <p>48912</p> <p>Based on record reviews and interviews, the facility failed to ensure adequate monitoring for side effects with the use of psychotropic and anticoagulant medication was completed for 3 (#1, #170, and #171) of 5 (#1, #168, #169, #170, and #171) residents reviewed for unnecessary medications. The facility failed to ensure:</p> <ol style="list-style-type: none"> 1. Resident #1 was monitored for side effects of an antidepressant medication; and 2. Residents #1, #170, and #171 were monitored for side effects of anticoagulant medications. <p>This deficient practice had the potential to affect any of the 19 residents residing on the Skilled Nursing Facility unit.</p> <p>Findings:</p> <ol style="list-style-type: none"> 1. <p>Review of Resident #1's Clinical Record revealed an admitted [DATE], with diagnoses which included Major Depressive Disorder, Anxiety Disorder, Angina Pectoris, and Hypertension.</p> <p>Review of Resident #1's active Physician Orders revealed, in part, an order dated 03/13/2025 for Lexapro 20 mg by mouth daily.</p> <p>Review of Resident #1's March 2025 Medication Administration Record (MAR) revealed Resident #1 had received the medication on 03/14/2025 through 03/19/2025.</p> <p>There was no documentation of monitoring for antidepressant medication side effects for Resident #1 to review.</p> 2. <p>Resident #1</p> <p>Review of Resident #1's active Physician Orders revealed, in part, an order dated 03/13/2025 for Lovenox 30 mg/0.3 mL subcutaneously once daily.</p> <p>Review of Resident #1's March 2025 Medication Administration Record revealed Resident #1 had received the medication on 03/14/2025 through 03/19/2025.</p> <p>There was no documentation of monitoring for anticoagulant medication's side effects for Resident #1 to review.</p> <p>Resident #170</p> <p>(continued on next page)</p>

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<p>F 0757</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of Resident #170's Clinical Record revealed an admitted [DATE], with diagnoses which included Right Leg Pain, Unspecified Fall, and Back Pain.</p> <p>Review of Resident #170's active Physician Orders revealed, in part, an order dated 03/04/2025 for Lovenox 40 mg/0.4 mL subcutaneously once daily.</p> <p>Review of Resident #170's March 2025 Medication Administration Record revealed Resident #170 had received the medication on 03/04/2025 through 03/19/2025.</p> <p>There was no documentation of monitoring for anticoagulant medication's side effects for Resident #170 to review.</p> <p>Resident #171</p> <p>Review of Resident #171's Clinical Record revealed an admitted [DATE], with diagnoses which included Diagnostic Heart Failure, Chronic Kidney Disease, and Presence of Artificial Hip Joint Bilaterally.</p> <p>Review of Resident #171's active Physician Orders revealed, in part, an order dated 03/04/2025 for Lovenox 30 mg/0.3 mL subcutaneously once daily.</p> <p>Review of Resident #171's March 2025 Medication Administration Record revealed Resident #171 had received the medication on 03/04/2025 through 03/19/2025.</p> <p>There was no documentation of monitoring for anticoagulant medication's side effects for Resident #171 to review.</p> <p>On 03/18/2025 at 10:43 a.m., an interview was conducted with S6LPN. She stated she was the nurse for Residents #1 and #170. S6LPN reviewed Resident #1's MAR, and confirmed Resident #1 was currently on and Lexapro 20mg and Lovenox 30mg/0.3 mL. S6LPN reviewed Resident #170's MAR, and she confirmed she was currently on Lovenox 40 mg/0.4 mL. S6LPN stated the electronic software system did not have a place to document side effects for antidepressants nor anticoagulants.</p> <p>On 03/18/2025 at 11:00 a.m., an interview was conducted with S7LPN. She stated she was the nurse for Resident #171. S7LPN reviewed Resident #171's MAR, and confirmed Resident #171 was on Lovenox 30 mg/0.3mL. S7LPN confirmed Lovenox was a high risk medication for bleeding, and there was no place to document monitoring in the electronic software system.</p> <p>(continued on next page)</p>

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<p>F 0757</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 03/18/2025 at 1:32 p.m., an interview was conducted with S2DON. She stated she expected staff to document the monitoring for side effects of antipsychotic medications including antidepressants and of anticoagulant medications. S2DON stated there should be a pop-up box, which appeared when a nurse scanned an antidepressant medication which allowed the nurse to enter a note for monitoring side of effects. S2DON reviewed the electronic software system and stated it did not provide a pop-up box for nurses to document monitoring for side effects for of antidepressants, and it should have. S2DON confirmed there was no place to document monitoring for side effects of anticoagulant medications. S2DON reviewed Residents #1, #170, and #171's March 2025 MAR and Electronic Health Record, and confirmed there was no documentation of monitoring for side effects for Resident #1's antidepressant medication or documentation for Residents #1, #170, and #171's anticoagulant medications, and there should have been. S2DON further confirmed she could not provide any documentation of monitoring for side effects for Resident #1's antidepressant nor Residents #1, #170 and #171's anticoagulant medications.</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48912</p> <p>Based on record review, observation, and interviews the facility failed to implement and maintain an infection prevention control program to help prevent the development and transmission of infection by failing to ensure staff donned proper Personal Protective Equipment (PPE), and performed proper hand hygiene during resident care for of 1 (#218) of 3 (#118, #121, and #218) residents whom required EBP (Enhanced Barrier Precautions).</p> <p>Findings:</p> <p>Review of the facility's policy with a revision date of 06/2024, and titled Isolation Precautions revealed the following, in part:</p> <p>Procedure:</p> <p>Gown and Glove Precautions-Hand Hygiene, Enhanced Barrier Precautions Skilled Nursing Facility</p> <p>3. Indwelling medical devices may include urinary catheters.</p> <p>4. EBP is employed when performing the following high-contact resident care activities:</p> <p>d. Providing hygiene</p> <p>f. Changing briefs or assisting with toileting</p> <p>g. Device care or use with indwelling medical devices</p> <p>Review of Resident #218's clinical record revealed an admitted [DATE] with diagnoses, which included Chronic Kidney Disease and Retention of Urine.</p> <p>On 03/17/2025 at 9:40 a.m., an observation was made of Resident #218's room door with EBP signage. Upon entrance to Resident #218's room an indwelling foley catheter was observed.</p> <p>On 03/18/2025 at 3:15 p.m., an observation was made of S5PCA performing catheter care for Resident #218. S5PCA entered the room, performed hand hygiene and applied gloves. S5PCA proceeded to gather her supplies and water, and placed them on Resident #218's bedside table. S5PCS opened the resident's dresser drawers for cleaning supplies, and then repositioned Resident #218. S5PCA then pulled down Resident #218's pants, opened her lightly soiled brief, and performed catheter care without donning a gown. Without removing dirty gloves and performing hand hygiene S5PCA continued. S5PCA then repositioned Resident #218 to expose her backside and cleaned her buttocks. S5PCA then with same gloves went into resident's dresser drawer and obtained a brief, she applied clean brief, repositioned Resident #218, and pulled up her pants, covered Resident #218 with bed linen, lowered her bed, and then removed gloves.</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 03/18/2025 at 3:27 p.m., an interview was conducted with S5PCA following catheter care observation. She confirmed Resident #218 had an EBP sign on her door. She read the signage and stated when a resident had an EBP sign on their door staff were expected to don gloves and a gown prior to performing high contact tasks such as performing catheter care. S5PCA confirmed she did not don a gown prior to performing catheter care on Resident #218 and should have. S5PCA also confirmed she did not change her gloves nor perform proper hand hygiene when going from clean to dirty and should have.</p> <p>On 03/19/2025 at 10:15 a.m., an interview was conducted with S2DON. She stated she expected staff to properly don and doff PPE when a resident is on EBP. S2DON confirmed staff were required to don and doff gown and gloves and use proper hand hygiene when performing catheter care. S2DON confirmed Resident #218 had an indwelling foley catheter. S2DON was informed of the aforementioned observations. S2DON confirmed she expected staff to properly don a gown while performing catheter care. S2DON further confirmed the PCA should have changed gloves and performed proper hand hygiene when going from clean to dirty.</p>		