STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	195184	A. Building B. Wing	06/29/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Chateau Living Center	716 Village Road Kenner, LA 70065

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 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. Based on observations and interviews, the facility failed to serve residents with proper utensils and dishware during meal service. Findings: Observation of Dining Room A on 06/27/2026 at 11:30AM revealed residents were given plastic utensils for use during the lunch meal service. Further observation revealed staff removed the plastic utensils from the tables and then provided silverware. In an interview on 06/27/2026 at 11:35AM, Resident #133 stated, we must be special today, we get silverware. Resident #133 indicated residents were typically given plastic utensils during meal service. Observations of Dining Room A and Dining Room B on 06/27/2026 at 12:10PM revealed all residents were served gumbo and dessert in Styrofoam containers. Observation on 06/27/2026 at 12:20PM revealed beverages for the hall trays were served in Styrofoam cups and some desserts were served in Styrofoam containers. In an interview on 06/27/2026 at 12:20PM, S4Certified Nursing Assistant (CNA) indicated there were many times residents were given plastic utensils and served using Styrofoam containers. S4CNA further indicated drinks for the hall trays were always served in Styrofoam cups. In an interview on 06/28/2026 at 11:50AM, Resident #35 indicated she received small plastic utensils often, but Resident #35 preferred silverware. Resident #35 further indicated the plastic utensils were cheap and bent when used. Observation of Dining Room B on 06/28/2026 at 12:00PM revealed unidentified residents were using their hands, forks, or spoons in attempt to cut the meat served for lunch. Further observation revealed 9 out of the 10 residents who were served regular meat were not provided a knife to cut their meat. In interviews on 06/28/2026 at 12:00PM, the unidentified residents indicated they were not provided a knife to cut their meat. In an interview on 06/28/2026 at 12:04PM, Resident #124 indicated he was served meals with plastic utensils and Styrofoam all the time. In an interview on 06/29/2026 8:00AM, S3Dietary Supervisor indicated residents were given Styrofoam cups daily on the halls because the regular cups were not returned to the kitchen. S3Dietary Supervisor further indicated residents had the right to be provided proper utensils and dishware during meal service, and the residents should not have been served in Styrofoam containers or given plastic utensils regularly for meal service.

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