

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195185	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/05/2025
NAME OF PROVIDER OR SUPPLIER Terrebonne General Med Ctr Snf		STREET ADDRESS, CITY, STATE, ZIP CODE 8166 Main Street Houma, LA 70360	

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 0582</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.</p> <p>34608</p> <p>Based on interviews and record reviews, the facility failed to ensure a Notice of Medicare Non-Coverage (NOMNC) Form (CMS-10123) was given to all Medicare beneficiaries who were discharged home with benefit days remaining, at least two days before the end of a Medicare covered Part A stay, for 3 (Resident #201, Resident #202, Resident #203) of 3 (Resident #201, Resident #202, Resident #203) sampled residents reviewed for beneficiary notification.</p> <p>Findings:</p> <p>Resident #201</p> <p>Review of Resident #201's medical record revealed, in part, Resident #201 was admitted for Medicare Part A services on 09/03/2024, and was discharged home on 09/20/2024.</p> <p>Review of Resident #201's Notice of Medicare Non-coverage (NOMNC) form revealed, in part, Resident #201's last covered day of Medicare Part A services was on 09/20/2024. Further review revealed there was no notification date documented on the NOMNC form.</p> <p>Resident #202</p> <p>Review of Resident #202's medical record revealed, in part, Resident #202 was admitted for Medicare Part A services on 12/13/2024, and was discharged home on 12/27/2024.</p> <p>Review of Resident #202's Notice of Medicare Non-coverage (NOMNC) form revealed, in part, Resident #202's last covered day of Medicare Part A services was on 12/27/2024. Further review revealed Resident #202's representative was notified via telephone on 12/27/2024 that Resident #202's last covered day of Medicare Part A services was 12/27/2024.</p> <p>Resident #203</p> <p>Review of Resident #203's medical record revealed, in part, Resident #203 was admitted for Medicare Part A services on 11/04/2024, and was discharged home on 11/15/2024.</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 0582</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of Resident #203's Notice of Medicare Non-coverage (NOMNC) form revealed, in part, Resident #203's last covered day of Medicare Part A services was on 11/15/2024. Further review revealed Resident #203 was notified on 11/14/2024 of Resident #203's last covered day of Medicare Part A services was 11/15/2024.</p> <p>In an interview on 02/05/2025 at 8:59AM S2Minimum Data Set Coordinator confirmed Resident #201, Resident #202, and Resident #203 was not notified via NOMNC (CMS-10123) Form at least two days before the last covered day of the Medicare Part A services and it should have been.</p>		

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<p>F 0729</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Verify that a nurse aide has been trained; and if they haven't worked as a nurse aide for 2 years, receive retraining.</p> <p>46361</p> <p>Based on interview and record review, the facility failed to ensure Certified Nursing Assistant (CNA) registry verification was completed prior to hire for 1 (S6Nursing Assistant [NA]) of 5 (S3CNA, S4CNA, S5NA, S6CNA, S7CNA) personnel records reviewed for registry verification.</p> <p>Findings:</p> <p>Review of S6NA's personnel record revealed a hire date of 05/20/2024. Further review revealed no documented evidence, and the facility did not present any documented evidence, a CNA registry check was obtained prior to hire for S6NA.</p> <p>In an interview on 02/05/2025 at 12:10PM S1Director indicated a CNA registry check was not obtained prior to hire for S6NA, as required.</p>

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<p>F 0949</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide behavior health training consistent with the requirements and as determined by a facility assessment.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46361</p> <p>Based on interview and record reviews, the facility failed to ensure a staff member received dementia trainings for 1 (S3Certified Nursing Assistant [CNA]) of 5 (S3CNA, S4CNA, S5Nursing Assistant [NA], S6CNA, S7CNA) personnel records reviewed for required trainings.</p> <p>Findings:</p> <p>Review of the facility's Skilled Nursing Facility assessment dated [DATE] revealed, in part, the facility had 31 residents with behavioral health needs, and serviced a population that was typically over [AGE] years old. Further review revealed CNAs were to receive trainings on Bathing and Dementia Care and Communicating with Residents with Dementia during orientation and/or annual competencies.</p> <p>Review of S3CNA's personnel record revealed, in part, no documented evidence, and the facility did not present any documented evidence, S3CNA received trainings on Bathing and Dementia Care and Communicating with Residents with Dementia during orientation and/or annual competencies.</p> <p>In an interview on 02/04/2025 at 4:25PM, S1Director indicated S3CNA had not received the above mentioned dementia trainings as determined to be required in the facility's Skilled Nursing Facility Assessment.</p>		