

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195272	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/16/2024
NAME OF PROVIDER OR SUPPLIER Jefferson Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2200 Jefferson Hwy Jefferson, LA 70121	

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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>17453</p> <p>Based on record reviews and interviews, the facility failed to administer medications per the physician's order for 1 (Resident #1) of 3 (Resident #1, Resident #2, and Resident #3) sampled resident's records reviewed for pharmaceutical services.</p> <p>Findings:</p> <p>Review of Resident #1's Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 09/11/2024 revealed, in part, Resident #1 received application of an ointment or medication other than to feet.</p> <p>Review of Resident #1's October 2024 Physician Orders revealed, in part, Nystatin powder (an antifungal medication) was to be applied to Resident #1's right abdominal fold twice a day and as needed until resolved. Further review revealed the nystatin powder was originally ordered on 07/09/2024.</p> <p>Review of Resident #1's September 2024 electronic Medication Administration Record (eMAR) revealed, in part, Nystatin powder was scheduled to be applied at 8:00 a.m. and 4:00 p.m. daily. Further review of the September 2024 eMAR revealed nystatin powder was not applied at 8:00 a.m. on 09/07/2024 and at 4:00 p.m. on 09/03/2024, 09/04/2024, 09/05/2024, 09/07/2024, 09/08/2024, 09/10/2024, 09/11/2024, 09/12/2024, 09/13/2024, 09/14/2024, 09/15/2024, 09/16/2024, 09/17/2024, 09/18/2024, 09/19/2024, 09/20/2024, 09/21/2024, 09/22/2024, 09/23/2024, 09/24/2024, 09/27/2024, 09/28/2024, 09/29/2024, and 09/30/2024.</p> <p>In an interview on 10/15/2024 at 1:44 p.m., S3Treatment Nurse indicated Resident #1's Nystatin powder was not applied twice per day on the above documented dates because she thought the Nystatin powder was ordered as needed.</p> <p>In an interview on 10/15/2024 at 2:00 p.m., S2DirectorOfNursing (DON) confirmed Resident #1's Nystatin powder was ordered to be applied twice per day and as needed.</p> <p>In an interview on 10/15/24 at 3:20 p.m., S2DON reviewed Resident #1's eMAR and indicated Resident #1's Nystatin powder was not applied as per the physician's orders on the above documented dates in September 2024.</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 0726</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.</p> <p>17453</p> <p>Based on record reviews and interviews, the facility failed to ensure a Licensed Practical Nurse displayed competency to clarify a physician's order related to a medication change for 1 (Resident #1) of 3 (Resident #1, Resident #2, and Resident #3) sampled resident's records reviewed for pharmaceutical services.</p> <p>Findings:</p> <p>Review of Louisiana Revised Statute, Title 37, Section 961 revealed, in part, the licensed practical nurse must practice under the direction of a licensed physician, optometrist, or dentist acting individually or as a member of the medical staff, registered nurse or physician assistant.</p> <p>Review of Resident #1's record revealed, in part, a diagnosis of Diabetes.</p> <p>Review of Resident #1's current Care Plan revealed, in part, Resident #1 has a diagnosis of Diabetes with an intervention which included to administer medications as ordered by the physician.</p> <p>Review of Resident #1's October 2024 Physician Orders with a start date of 10/11/2024 revealed an order to administer Tresiba (a long acting insulin used to control high blood sugar) 30 Units (U) every day at 7:00 p. m.</p> <p>In an interview on 10/16/2024 at 9:11 a.m., S2Director Of Nursing (DON) indicated S4Licensed Practical Nurse (LPN) was Resident #1's assigned nurse on 10/15/2024 from 3:00 p.m. to 11:00 p.m. and she had reported a potential issue which required clarification for Resident #1's Tresiba order.</p> <p>Review of Resident #1's October 2024 Discontinued Physician orders was completed on 10/16/2024 at 9:20 a. m. and revealed, in part, Tresiba 30U to be injected two times a day was ordered on 10/15/2024 and it was discontinued on 10/15/2024.</p> <p>Review of Resident #1's record revealed, in part, on 10/15/2024 at 10:51 a.m. S5LPN changed Resident #1's Tresiba order from 30U every day to 30U twice per day. Further review of Resident #1's record revealed no documented evidence, and the provider was unable to present any documented evidence, of a physician's order to change Resident #1's Tresiba to 30U twice a day.</p> <p>There was no documented evidence and the facility did not present any documented evidence that S4LPN and/or S5LPN called Resident #1's physician to clarify the frequency of administration of Resident #1's above mentioned Tresiba order.</p> <p>In an interview on 10/16/2024 at 1:01p.m., S5LPN indicated on 10/15/2024 she changed Resident #1's Tresiba order from once a day to twice a day. S5LPN indicated she did not have a physician order to change the Tresiba to twice a day.</p> <p>Review of S5LPN's personnel record revealed, in part, a hire date of 09/02/2024.</p> <p>(continued on next page)</p>		

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<p>F 0726</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of S5LPN's Nursing orientation and competency revealed, in part, the competency of medications was not completed.</p> <p>In an interview on 10/16/2024 at 3:15 p.m., S6Assistant Director of Nursing indicated she completed S5LPN's orientation and she must have overlooked the competency of medications.</p> <p>In an interview on 10/16/2024 at 1:53p.m., S2DON indicated on Monday 10/15/2024 S5LPN changed Resident #1's Tresiba order to twice a day without a physician's order and should not have been changed without an order.</p> <p>In an interview on 10/16/2024 at 3:10 p.m., S2DON confirmed S5LPN's nursing orientation and competency revealed, in part, the competency of medications was not completed and should have been completed.</p>

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p>17453</p> <p>Based on record reviews and interviews, the facility failed to ensure medication administration records were complete and/or accurately documented for 2 (Resident #1 and Resident#2) of 3 (Resident #1, Resident #2, and Resident #3) sampled residents investigated for pharmacy.</p> <p>Findings:</p> <p>Review of the Licensed Practical Nurse's job description dated 04/15/2015 revealed, in part, the following responsibilities:</p> <ol style="list-style-type: none"> 1. Prepare and administer medications according to procedure; and, 2. Record nursing information on resident's care plan and clinical record, including medication records. <p>Resident #1</p> <p>Review of Resident #1's October 2024 Physician's Orders revealed, in part, the following:</p> <ol style="list-style-type: none"> 1. Gabapentin tablet (a medication used to treat seizures and neuropathic pain) give 600 milligrams (mg) three times a day; 2. Artificial tears (a medication used to treat dry eyes) ophthalmic solution instill one drop in the left eye four times a day, and 3. Prednisolone-Moxifloxacin-Bromfenac eye drops (an eye drop used for inflammation, infection, and pain after surgery) instill one drop three times a day. <p>Review of Resident #1's October 2024 electronic Medication Administration Record (eMAR) revealed, in part, no documented evidence and the facility did not present any documented evidence that the following was documented as administered:</p> <ol style="list-style-type: none"> 1. Gabapentin 600 mg for scheduled dose on 10/05/2024 at 12:00 p.m.; 2. Artificial tears ophthalmic solution for scheduled dose on 10/05/2024 at 12:00 p.m., and 3. Prednisolone-Moxifloxacin-Bromfenac eye drops for scheduled dose on 10/05/2024 at 2:00 p.m. <p>In an interview on 10/16/2024 at 9:20 a.m., S2Director of Nursing (DON) confirmed the above mentioned eMAR omissions. S2DON further indicated all medications should have been documented as administered or the appropriate chart code should be documented if the medications were not administered.</p> <p>Resident #2</p> <p>(continued on next page)</p>

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of Resident #2's October 2024 Physician Orders revealed, in part, the following:</p> <ol style="list-style-type: none"> 1. Aspirin tablet (a medication used to prevent blood clots) 81 mg, give one tablet by mouth one time a day; 2. Ferrous Sulfate tablet (a medication used to treat iron-deficiency anemia) 325 mg, give one tablet by mouth one time a day; 3. Folic Acid tablet (a medication used to treat vitamin B deficiency) 1mg, give one tablet by mouth one time a day; 4. Insulin Glargine solution (a medication used to treat high blood sugar) 100 unit/milliliter(ml), inject 14 units subcutaneously one time a day; 5. Levothyroxine Sodium tablet (a medication used to treat thyroid) 50 microgram(mcg), give one tablet by mouth two times a day; 6. Norvasc tablet (a medication used to treat high blood pressure) 10mg, give one tablet by mouth on time a day; 7. Zoloft tablet (a medication used to treat depression, anxiety, and post-traumatic stress disorder) 100 mg, give one tablet by mouth one time a day; 8. Fluoxetine Hydrochloride (HCl) tablet (a medication used to treat depression) 40mg, give one tablet by mouth two times a day; 9. Senna tablet (a medication used to treat constipation) 8.6 mg, give one tablet by mouth two times a day; and 10. Insulin Aspart tablet (a medication used to treat high blood sugar) 100 Unit/ml, inject 3 units subcutaneously three times a day. <p>Review of Resident #2's October 2024 Electronic Medication Administration Record revealed, in part, no documented evidence and the facility did not present any documented evidence that the following was documented as administered:</p> <ol style="list-style-type: none"> 1. Aspirin 81mg for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m.; 2. Ferrous Sulfate 325mg for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m.; 3. Folic Acid 1mg for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m.; 4. Insulin Glargine solution 14 units for scheduled doses on 10/1/2024 at 6:00 a.m. and 10/12/2025 at 6:00 a.m.; 5. Levothyroxine Sodium 50 mcg for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m.; <p>(continued on next page)</p>

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>6. Norvasc 10mg for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m.;</p> <p>7. Zolofit 100mg for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m.;</p> <p>8. Fluoxetine HCl 40mg for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m.;</p> <p>9. Senna 8.6 mg for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m. and,</p> <p>10. Insulin Aspart 3 units for scheduled doses on 10/5/2024 at 9:00 a.m. and 10/13/2025 at 9:00 a.m.</p> <p>In an interview on 10/16/2024 at 10:12 a.m., S2DON confirmed the above eMAR omissions. S2DON indicated all medications should have been documented when administered or as applicable.</p> <p>49259</p>