

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195407	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/02/2025
NAME OF PROVIDER OR SUPPLIER Ringgold Nursing and Rehabilitation Center, LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 2501 Kenneth Street Ringgold, LA 71068	

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 0578</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive.</p> <p>Based on record reviews and interview the facility failed to inform and provide written information to residents or resident's representative concerning the right to formulate an advance directive for 15 (#3, #8, #16, #21, #33, #34, #36, #53, 56, #63, #66, #71, #73, #76, #291) out of 15 residents reviewed for advanced directives.</p> <p>Findings:</p> <p>Review of Resident #3's medical record revealed resident was admitted to facility on 03/02/2015 with re-entry on 05/16/2016. Further review of Resident #3's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #8's medical record revealed resident was admitted to facility on 09/23/2019. Further review of Resident #8's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #16's medical record revealed resident was admitted to facility on 09/05/2021 with re-entry on 07/02/2024. Further review of Resident # 16's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #21's medical record revealed resident was admitted to facility on 03/12/2015. Further review of Resident #21's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #33's medical record revealed resident was admitted to facility on 01/30/2019. Further review of Resident #33's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #34's medical record revealed resident was admitted to facility on 09/26/2018. Further review of Resident #34's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #36's medical record revealed resident was admitted to facility on 05/15/2022. Further review of Resident #36's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</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 0578</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of Resident #53's medical record revealed resident was admitted to facility on 02/05/2021. Further review of Resident #53's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #56's medical record revealed resident was admitted to facility on 02/02/2022. Further review of Resident #56's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #63's medical record revealed resident was admitted to facility on 05/04/2022. Further review of Resident #63's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #66's medical record revealed resident was admitted to facility on 07/01/2022 with re-entry on 02/03/2025. Further review of Resident #66's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #71's medical record revealed resident was admitted to facility on 11/29/2023. Further review of Resident #71's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #73's medical record revealed resident was admitted to facility on 10/26/2023. Further review of Resident #73's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #76's medical record revealed resident was admitted to facility on 10/18/2023. Further review of Resident #76's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>Review of Resident #291's medical record revealed resident was admitted to facility on 01/20/2022 with re-entry 06/24/2025. Further review of Resident #291's medical record failed to reveal resident or resident's representative was provided with written information concerning advance directives.</p> <p>During an interview on 07/01/2025 at 10:38 a.m. S3 Business Office Manager confirmed Resident #3's, #8's, #16's, #21's, #33's, #34's, #36's, #53's, 56's, #63's, #66's, #71's, #73's, #76's, and #291's medical record failed to reveal documentation the resident or resident's representative was provided written information concerning advance directives.</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>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>Based on record review and interviews, the facility failed to develop and implement a comprehensive person-centered care plan for 1 (#24) of 19 care plans reviewed.</p> <p>Findings:</p> <p>Review of Resident #24's medical record revealed an admit date of 02/14/2025 with diagnoses that include in part chronic pain, dependence on supplemental oxygen, heart failure, essential hypertension, major depressive disorder and generalized anxiety disorder.</p> <p>Review of Resident #24's physician orders revealed in part an order dated 6/26/2025 Hydrocodone-Acetaminophen oral tablet 7.5-325 MG (milligram) Give 1 (one) tablet by mouth every morning and at bedtime for pain related to other chronic pain.</p> <p>Review of Resident #24's comprehensive care plan failed to reveal a care plan had been implemented with appropriate approaches for chronic pain.</p> <p>During an interview on 07/01/2025 at 11:30 a.m. S2 Licensed Practical Nurse/Minimum Data Set Coordinator reviewed Resident #24's care plan and verified Resident #24 had not been care planned with appropriate interventions for chronic pain and should have been.</p> <p>During an interview on 07/01/2025 at 11:40 a.m. S1 Director of Nursing reviewed Resident #24's care plan and verified Resident #24 had not been care planned for chronic pain and should have been.</p>