

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  195430	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/01/2025
NAME OF PROVIDER OR SUPPLIER  Colfax Nursing and Rehab, LLC		STREET ADDRESS, CITY, STATE, ZIP CODE  366 Webb Smith Drive Colfax, LA 71417	

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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on interview and record review the facility failed to ensure that each Resident was treated with respect and dignity in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, by failing to honor resident's right to have access to the facility patio area outside of smoking times for 3 (#2, #3, and #R1) of 4 (#1, #2, #3, and #R1) sampled resident.</p> <p>Findings:</p> <p>Review of the Facility's undated policy titled Resident's [NAME] of Rights read in part . A. All nursing homes shall adopt and make public a statement of the rights and responsibilities of the residents residing therein and shall treat such resident in accordance with the provisions of the statement. The statement shall ensure each resident the following: 1. The right to civil and religious liberties, including but not limited to knowledge of their available choices, the right to independent personal decision, and the right to encouragement and assistance from staff of the facility in the fullest possible exercise of these rights.</p> <p>Review of the Resident Council minutes dated 05/02/2025 read in part Resident's want to sit outside on the patio, just to go outside and get fresh air, more than 3 times a day. Not to smoke but just to sit outside. Response made by S1 Admin on 05/07/2025 read in part There isn't anything in place that is stopping residents from going outside, however staff must be present in the even that something would happen.</p> <p>Resident #2</p> <p>Review of Resident #2's medical record revealed and admit date of 09/27/2023 with a readmission on [DATE] with the following diagnoses: Intracranial Injury with loss of conscious, Tremors, Schizoaffective Disorder, and Traumatic Brain Injury.</p> <p>Review of Resident #2's 05/21/2025 Quarterly MDS revealed a BIMS score of 10, indicating moderate cognition impairment.</p> <p>Interview on 06/30/2025 at 10:20 a.m. with Resident #2 revealed that residents aren't allowed outside other than 3 times a day at 9:00 a.m., 3:00 p.m., and 7:00 p.m. during smoke breaks.</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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Interview on 06/30/2025 at 3:15 p.m. with Resident #2 revealed that he has asked to be taken outside at times other than 9:00 a.m., 3:00 p.m., and 7:00 p.m. and has been told by staff (can't recall who) that they would get in trouble if they would let him go outside.</p> <p>Resident #3</p> <p>Review of Resident #3's medical record revealed an admit date of 10/04/2024 with diagnoses that included: Atherosclerotic Heart Disease of Native Coronary Artery without Angina Pectoris, Morbid Obesity, Tobacco use, Chronic Obstructive Pulmonary Disease, Schizoaffective Disorder, and Insomnia.</p> <p>Review of Resident #3's 06/18/2025 Quarterly MDS revealed a BIMS score of 15, indicating intact cognition.</p> <p>Interview in 06/30/2025 at 10:43 a.m. with Resident #3 revealed residents are only to go outside at 9:00 a.m. 3:00 p.m., and 7:00 p.m. to smoke or just to go outside in general. Resident #3 stated that S1 Admin notified him that if a staff member isn't busy they can bring residents outside. Resident #3 stated that is not happening. Resident #3 stated he has asked to go outside at different time other than the 3 times a day and has been told by staff that they are too busy to bring him outside. Resident #3 stated he doesn't have to smoke but just wants the opportunity to go outside during the day.</p> <p>Resident #R1</p> <p>Review of Resident #R1's medical record revealed and admit date of 06/19/2023 with diagnoses that included: Hemiplegia and Hemiparesis following Cerebral Infarction, Amputation of leg below the left knee, Hypertension, Impulse Disorder, and Heart Disease.</p> <p>Review of Resident #R1's 04/16/2025 Annual MDS revealed a BIMS score of 13, indicating intact cognition.</p> <p>Interview on 07/01/2025 at 10:15 a.m. with Resident #R1 revealed that he has asked on different occasions to go outside to smoke or just to be outside and has been told no, and that he is only allowed during the smoking times. Resident #R1 stated he feels confined in the facility like a prison at times.</p> <p>Interview on 06/30/2025 at 1:00 p.m. with S5 LPN revealed that residents are not allowed to go outside by themselves without supervision not matter there cognition. S5 LPN stated that that staff can bring resident outside of the smoke times if they have time, but does not happen often.</p> <p>Interview on 06/30/2025 at 1:45p.m. Staff interview with S6 Regional Admin revealed that resident had some complaints recently about wanting more outside time and the resolution was to add more outdoor activities, which has been put into place. S6 Regional Admin stated that if any residents wants to go outside of the assigned smoking times, they just have to ask staff to bring them outside.</p> <p>Interview on 06/30/2025 at 3:15 p.m. with S4 CNA stated that she has been told by nurses (cant recall who) that residents are only allowed outside at the allowed smoking times. S4 CNA stated if a resident asked to go outdoors, outside of smoking time frames, she has been told to tell them to wait until the smoking times.</p> <p>(continued on next page)</p>		

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<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Interview on 07/01/2025 at 12:55 p.m. with S1 Admin stated that residents have the right to go outside with a staff member present outside of the 3 smoke breaks a day.</p>



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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>room [ROOM NUMBER]- 140.0 degrees F. No Resident concerns</p> <p>room [ROOM NUMBER]-132.4 degrees F. No resident concerns</p> <p>room [ROOM NUMBER]- 135.0 degrees F. No resident concerns</p> <p>room [ROOM NUMBER]- 140.0 degrees F. No resident concerns</p> <p>room [ROOM NUMBER]-137.2 degrees F. No resident concerns</p> <p>room [ROOM NUMBER]-140.0 degrees F. No resident concerns</p> <p>room [ROOM NUMBER]-134.7 degrees F. No resident concerns</p> <p>room [ROOM NUMBER]-125.0 degrees F. No resident concerns</p> <p>room [ROOM NUMBER]-123.2 degrees F. No resident concerns</p> <p>room [ROOM NUMBER]-122.0 degrees F. No resident concerns</p> <p>Interview on 06/30/2025 at 12:55 p.m. with S2 DON revealed there were no incidents and denies any scalding, burns, or complaints of water being too hot from any residents in the facility.</p> <p>Interview on 06/30/2025 at 1:00 p.m. with S1 Admin revealed there were no incidents and denies any scalding, burns or any complaints of water being too hot from residents or staff.</p> <p>Interview on 06/30/2025 at 2:13 p.m. with S1 Admin confirmed that the temperatures for the 15 rooms were above the 120 degrees F, and should not have been.</p>

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>Based on observation and interview, the facility failed to maintain a sanitary and comfortable homelike environment for all residents in the facility by failing to ensure the facility was free of odor. The facility census was 73.</p> <p>Findings:</p> <p>Review of the facility's undated policy titled Homelike Environment read in part Residents are provided a safe, clean, comfortable environment and encouraged to use their personal belongings to the extent possible. Policy Interpretation and Implementation: 2. The facility staff and management maximizes, to the extent possible, the characteristics of the facility that reflect a personalized, homelike setting. These characteristics include: f. pleasant, neutral scents.</p> <p>Observation upon entrance on 06/30/2025 at 8:15 a.m. revealed a strong urine odor throughout facility.</p> <p>Review of the Resident council minutes for 04/03/2025 revealed resident complained of the hall ways smelling bad. The follow up response made to the resident council grievance read .The rooms and hallways are cleaned, but there are a couple residents that change themselves and leave diapers, clothes and towels that have a smell.</p> <p>Interview on 06/30/2025 at 8:35 a.m. with Resident #1's responsible party revealed that every time she came into the facility she always smelled a very strong urine odor throughout the facility.</p> <p>Observation on 06/30/2025 at 10:19 a.m. revealed a strong odor pungent odor on X hall.</p> <p>Interview and Observation on 06/30/2025 at 10:20 a.m. Resident #2's room revealed a strong urine odor and the floor was sticky. Resident #2 stated the cleanliness is poor in the facility. Resident #2 stated he can't hold his bowel and bladder and the room starts to smell.</p> <p>Interview on 06/30/2025 at 10:43 a.m. with Resident #3 revealed the cleanliness in the facility isn't great. Resident #3 stated the housekeeping staff typically come in daily and change out the trash. Resident #3 stated the floors are usually dirty and only mopped once or twice a week.</p> <p>Interview on 06/30/2025 at 1:30 p.m. with S7 Housekeeping stated there was a strong urine odor in the facility today. S7 Housekeeping stated there are no housekeeping after 3:00 p.m. so the odor may be the linen barrel that hadn't been sent to laundry.</p> <p>Interview on 06/30/2025 at 2:24 p.m. with S8 LPN stated the urine odor was very strong this morning. S8 LPN stated she asked about the odor and was told agency staff had worked last night and they leave diapers in the trash can in the room overnight.</p>