STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	195480	A. Building B. Wing	01/14/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark South Nursing & Rehabilitation Center	18180 Jefferson Hwy Baton Rouge, LA 70817

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 0641 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Ensure each resident receives an accurate assessment. Based on interviews and record review, the facility failed to accurately code PASRR Level IIs on the residents' MDS assessments for 3 of 3 (#15, #101, and #128) residents reviewed with Level II PASRRs.Resident #15 Review of Resident #15's Clinical Record revealed an admission date of 05/05/2023 and diagnoses, which included Bipolar Disorder, Current Episode, Depressed, Severe, With Psychotic Features, and Personal History of Suicidal Behavior. Review of Resident #15's Form 142s revealed Resident #15 was approved for admission by Level II authority for temporary periods effective 10/24/2024 through 10/23/2025 and 10/24/2025 through 10/23/2026. Resident #15's Annual MDS with an ARD of 03/17/2025 revealed an answer of no to the following question: A1500 – Is the resident currently considered by the state level II PASRR process to have serious mental illness and/or intellectual disability or a related condition? An interview was conducted with S3MDS on 01/14/2026 at 10:40 a.m. She stated she was responsible for completing MDS assessments for Resident #15. She stated when a resident had a Level II PASRR, the A1500 question on the MDS should have been answered yes. She reviewed Resident #15's clinical record and confirmed Resident #15 had a Level II PASRR. She confirmed Resident #15's MDS with an ARD of 03/17/2025 was not accurately coded for the Level II PASRR and should have been. Resident #101 Review of Resident #101's Clinical Record revealed an admission date of 08/24/2024 and diagnoses, which included Schizophrenia and Major Depressive Disorder. Review of Resident #101's BHSF Form 142s revealed Resident #101 was approved for admission by Level II authority for temporary periods effective 10/12/2024 through 10/11/2025 and 10/12/2025 through 10/11/2026. Resident #101's Annual MDS with an ARD of 04/29/2025 revealed an answer of no to the following question: A1500 – Is the resident currently considered by the state level II PASRR process to have serious mental illness and/or intellectual disability or a related condition? (continued on next page)

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	195480	A. Building B. Wing	01/14/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark South Nursing & Rehabilitation Center	18180 Jefferson Hwy Baton Rouge, LA 70817

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0641 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Resident #128 Review of Resident #128's Clinical Record revealed an admission date of 06/25/2019 and diagnoses, which included Bipolar Disorder and Generalized Anxiety Disorder. Review of Resident #128's current BHSF Form 142 revealed Resident #128 was approved for admission by Level II authority for a temporary period effective 03/01/2025 through 02/28/2026. Resident #128's Annual MDS with an ARD of 12/16/2025 revealed an answer of no to the following question: A1500 – Is the resident currently considered by the state level II PASRR process to have serious mental illness and/or intellectual disability or a related condition? An interview was conducted with S2MDS on 01/13/2026 at 12:22 p.m. She stated she was responsible for completing MDS assessments for Residents #101 and #128. She stated when a resident had a Level II PASRR, the A1500 question on the MDS should have been answered yes. She reviewed Residents #101 and #128's clinical record and confirmed both residents had a Level II PASRR. She confirmed Resident #101's MDS with an ARD of 04/29/2025 was not accurately coded for the Level II PASRR and should have been. She confirmed Resident #128's MDS with an ARD of 12/19/2025 was not accurately coded for the Level II PASRR and should have been. An interview was conducted with S1DON on 01/13/2026 at 12:32 p.m. She confirmed when the resident had a Level II PASRR, A1500 should have been coded accurately on the comprehensive MDS.