

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195501	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/25/2024
NAME OF PROVIDER OR SUPPLIER Harvest Manor Healthcare and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 839 North Range Avenue Denham Springs, LA 70726	

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 0561</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Honor the resident's right to and the facility must promote and facilitate resident self-determination through support of resident choice.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44965</p> <p>Based on interviews and record review, the facility failed to promote and facilitate resident self-determination through support of resident choice of when to get out of bed for 1 (#99) of 4 (#27, #93, #99, and #108) residents reviewed for resident rights.</p> <p>Findings:</p> <p>Review of Resident #99's Clinical Record revealed she was admitted to the facility on [DATE] and had diagnoses, which included Malignant Neoplasm of Brain Stem, Parkinsonism, Muscle Wasting and Atrophy, Other Lack of Coordination, and Hemiplegia.</p> <p>Review of Resident #99's Quarterly MDS with an ARD of 06/18/2024 revealed she had a BIMS of 14, which indicated she was cognitively intact. Further review of the MDS revealed she required substantial/maximal assistance from staff for transfers.</p> <p>An interview was conducted with Resident #99 on 07/23/2024 at 2:25 p.m. She stated, on the evening of 07/22/2024, she requested to get out of bed after incontinence care, and the CNA did not assist her out of bed.</p> <p>An interview was conducted with S4CNA on 07/23/2024 at 3:06 p.m. She stated she was assigned to Resident #99 from 2:00 p.m. to 10:00 p.m. on 07/22/2024. She stated Resident #99 requested to get out of bed after incontinence care. She stated she told Resident #99 she was uncomfortable transferring her independently, so she wanted to wait until another CNA was available to assist. She confirmed she did not get Resident #99 out of bed or seek assistance to get Resident #99 out of bed when she requested and should have. She confirmed Resident #99 had the right to choose when to get in and out of bed.</p> <p>An interview was conducted with S3RNC on 07/23/2024 at 3:22 p.m. She stated, on 07/22/2024, she was notified by Resident #99's family, the CNA did not get Resident #99 out of bed when requested. She stated she went and talked with Resident #99, and she was in bed. She stated S4CNA should have asked someone to assist her getting Resident #99 out of bed and she did not. She confirmed Resident #99 should have been assisted out of bed when she requested.</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 0561</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p>	<p>An interview was conducted with S2DON on 07/24/2024 at 9:20 a.m. She stated residents had the right to get in and out of bed when they requested. She stated if Resident #99 had to get in bed for incontinence care and wanted to get back out of bed after, she should have been able to get back up. She confirmed residents had the right to choose when to get in and out of bed.</p>

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<p>F 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure each resident receives an accurate assessment.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43133 46981</p> <p>Based on observation, interviews and record review, the facility failed to ensure the MDS assessment accurately reflected the resident's status for 4 (#72, #84, #105, and #162) residents out of a total of 32 sampled residents. The facility failed to ensure:</p> <ol style="list-style-type: none"> 1. Resident #72 was coded correctly for medications; 2. Resident #84 was coded correctly for dental; 3. Resident #105 was coded correctly for PASARR (Pre-admission Screening and Resident Review); and 4. Resident #162 was coded correctly for discharge. <p>Findings:</p> <ol style="list-style-type: none"> 1. Review of Resident #72's Clinical Record revealed she was admitted to the facility on [DATE] with diagnoses which included Unspecified Dementia, Major Depressive Disorder, and Altered Mental Status. Review of Resident #72's Quarterly MDS with an ARD of 05/21/2024 revealed in part, the following: Section N-Medications: N0415F1: High Risk Drugs-Antibiotic (is taking) Checked N0415F2: High Risk Drugs-Antibiotic (indication noted) Checked. Review of Resident #72's Physician Orders dated May 2024 revealed no documentation of resident received antibiotics during look back period for the above Quarterly MDS. 2. Review of Resident #84's Clinical Record revealed he was admitted to the facility on [DATE] with diagnoses which included Other Dental Procedure Status. Review of Resident #84's Annual MDS with an ARD of 04/09/2024 revealed in part, the following: Section L-Oral Dental Status: Z-None of the above were present. Review of Resident #84's dentist note dated 03/07/2024 revealed in part, the following: Moderate-heavy plaque. Oral hygiene is poor. Gingiva is red and inflamed with bleeding. <p>(continued on next page)</p>

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<p>F 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>An observation was made on 07/24/2024 at 1:59 p.m. of Resident #84. Observed multiple missing teeth and severely yellowed teeth.</p> <p>3.</p> <p>Review of Resident #105's Clinical Record revealed she was admitted to the facility on [DATE] with diagnoses which included Anxiety Disorder, Hallucinations, and Unspecified Psychosis.</p> <p>Review of Resident #105's Form 142 revealed resident was approved for admission by Level II Authority for a temporary period effective 12/27/2022 through 12/26/2023. Sign and dated on 12/27/2022 by Agency Representative.</p> <p>Review of Resident #105's OBH-Level II Evaluation Summary & Determination Notice dated 12/27/2022 revealed: The individual has a serious mental illness.</p> <p>Review of Resident #105's Annual Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 11/07/2023 revealed Section A1500 PASRR was coded as 0. No. Further review revealed the following:</p> <p>Section A1510A: Serious Mental Illness was blank.</p> <p>4.</p> <p>Review of Resident #162's Clinical Record revealed he was admitted to the facility on [DATE] and discharged on [DATE].</p> <p>Review of Resident #162's Discharge MDS with an ARD of 05/14/2024 revealed Section A2105 Discharge Status: Short Term General Hospital.</p> <p>Review of Resident #162's Nurse's Note dated 05/15/2024 included the following, in part:</p> <p>Discharge home with wife.</p> <p>An interview was conducted on 07/23/2024 at 11:25 a.m. with S5MDSN. She reviewed the aforementioned findings and confirmed Residents' #72, #84, #105, and #162 MDS assessments should have been coded correctly.</p> <p>An interview was conducted on 07/23/2024 at 11:30 a.m. with S2DON. She stated she expected all residents' MDS assessments to be coded correctly.</p>		

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<p>F 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47173</p> <p>Based on record review, observations and interviews, the facility failed to ensure medications were administered to meet professional standards, by leaving the medications at the bedside for 1 (#101) of 32 residents observed during the initial screening of residents upon facility entrance.</p> <p>Findings:</p> <p>Review of the facility's policy titled, Medication Administration Policy, dated 08/27/2018 revealed the following, in part:</p> <p>Purpose:</p> <p>To define responsibility and delineate processes for safe administration of medications by nursing personnel.</p> <p>Policy:</p> <p>Nursing personnel shall ensure the safe and effective administration of medications.</p> <p>Procedure:</p> <p>8. Medication Preparation and Security:</p> <p>c. Medications shall not be left unattended</p> <p>Review of Resident #101's Clinical Record revealed he was admitted to the facility on [DATE] with diagnoses, which included Urinary Tract Infection (07/19/2024).</p> <p>Review of Resident #101's Yearly MDS with an ARD of 06/04/2024, revealed a BIMS of 15, which indicated he was cognitively intact.</p> <p>Review of Resident #101's Medication Administration Record dated July 2024 revealed:</p> <p>Aspirin 81mg was administered by mouth on 07/01/2024 through 07/24/2024 daily at 8:00 a.m.</p> <p>On 07/22/2024 at 11:30 a.m., an observation was made of two small, round, yellow pills on Resident #101's bedside table. Resident #101 stated S8LPN left his medication on his bedside table without waking him up and he would take his medications when he awoke for the day. He confirmed the two pills were his baby aspirin. He stated he recently was diagnosed with a Urinary Tract Infection so he had been taking out the baby aspirin.</p> <p>On 07/22/2024 at 11:35 p.m., an interview was conducted with S8LPN. She observed and verified the two yellow pills at Resident #101's bedside table. She confirmed both pills were 81 mg Aspirin and were left at Resident #101's bedside and should not have been.</p> <p>(continued on next page)</p>		

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F 0658 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	On 07/24/2024 at 10:55 a.m., an interview was conducted with S2DON. She confirmed medications should not have been left at the resident's bedside. She stated she expected the nurse to observe the resident swallow the medication and if the resident refused any medications the nurse should take the medication back and dispose of it.		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>43133</p> <p>Based on observations and interviews, the facility failed to store food in accordance with professional standards for food service safety. This had the potential to effect 157 residents who were served from the kitchen.</p> <p>Findings:</p> <p>Review of the facility's policy titled Storage of Frozen Food dated 01/2007 revealed the following, in part</p> <p>Policy:</p> <p>The facility ensures the quality and safety of frozen foods through accepted storage practices.</p> <p>Procedure:</p> <p>5. Food taken out of original containers is put in a clean sanitized container with a tight fitting lid. No food is left uncovered.</p> <p>6. Frozen foods that are stored in open containers or packages are labeled with name of food and date stored.</p> <p>7. Opened boxes with liners should be closed and sealed tightly with packing tape.</p> <p>On 07/21/2024 at 8:45 a.m., an initial tour of the kitchen was conducted with S6C who confirmed the following observations:</p> <p>Freezer:</p> <p>The following items were observed in unsealed bags in open cardboard boxes:</p> <ul style="list-style-type: none"> -3 ounce plastic bag of breaded fish coquettes -2.2 ounce plastic bag of Southern style biscuit dough -20.25 pound plastic bag of sopapilla bites -30 pound plastic bag of whole kernel corn <p>On 07/21/2024 at 8:50 a.m., an interview was held with S6C. S6C confirmed the aforementioned items were open, not sealed, and should have been.</p> <p>On 07/24/24 at 9:30 a.m., an interview was conducted with S7DM. She confirmed all foods stored in the freezer should be sealed and not left open to air.</p> <p>(continued on next page)</p>

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 07/25/2024 at 11:50 p.m., an interview was conducted with S1ADM. He was notified of the aforementioned findings. S1ADM confirmed opened food items should be sealed and not open to air in the freezer.</p> <p>46225</p>