

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195575	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/03/2025
NAME OF PROVIDER OR SUPPLIER Oak Haven Rehabilitation and Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1515 Highway 107 Center Point, LA 71323	

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 0658 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure services provided by the nursing facility meet professional standards of quality. (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

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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>Based on observation, interview, and record review, the facility failed to ensure services were provided by the facility to meet quality professional standards for 1 (Resident #4) of 4 (#1, #2, #3, #4) sampled residents. The facility failed to ensure Resident #4's physician's orders for a dietary supplement was carried out. Review of facility policy titled, Nutritional and Dietary Supplements, revised 09/01/2024, revealed in part. It is the policy of this facility that nutritional and dietary supplements will be used to complement a resident's dietary needs in order to maintain adequate nutritional status and the resident's highest practicable level of well-being. The facility will provide nutritional and dietary supplements to each resident, consistent with the residents' assessed needs. Review of Resident #4's medical record revealed an admission date of 05/31/2022, with diagnoses that included, in part. Unspecified Dementia, Severe, with Agitation, Bipolar Disorder, Major Depressive Disorder, Generalized Muscle Weakness, and Dysphagia. Review of Resident #4's quarterly MDS with ARD of 11/26/2025 revealed in part. Resident #4 had a BIMS of 4, indicating severe cognitive impairment. Review of Resident #4's documented weights from 09/24/2025 to 11/26/2025 revealed the following: 11/26/2025 16:00 131.0 lbs (pounds) 11/19/2025 13:41 132.0 Lbs 11/12/2025 11:54 132.6 Lbs 11/6/2025 16:14 132.0 Lbs 10/29/2025 11:44 134.0 Lbs 9/24/2025 14:33 143.0 Lbs Review of Resident #4's 12/2025 physician orders revealed in part. 10/31/2025: Ice cream daily with lunch one time a day for weight loss. Review of Resident #4's Care plan with initiation date of 05/31/2022 revealed Resident #4 had a nutritional problem related to mechanical altered diet, depression, GERD, dementia, and bipolar disorder with interventions that included but not limited to. 10/29/2025 Weight Loss Intervention: Add ice cream 4oz daily, 11/12/2025 Continue house supplement/ice cream, Provide and serve my supplements as ordered, and provide, serve my diet as ordered. Monitor intake and record every meal. Resident #4 had an ADL self-care performance deficit related to dementia with interventions that included, in part. EATING: I am totally dependent on (1) staff for eating. In an observation on 12/03/2025 at 12:52 p.m., Resident #4's completed meal try revealed no indications that the resident was served ice cream with her lunch. Observation of Resident #4's dietary card revealed no reflection that Resident #4 is ordered 4oz (ounces) of ice cream at lunch daily. In an interview on 12/03/2025 at 1:00 p.m., S9CNA revealed she assisted/fed Resident #4 lunch that day. S9CNA confirmed the resident was not served ice cream with her lunch and did not receive ice cream at any time during lunch that day. In an interview on 12/03/2025 at 1:02 p.m., S8CNA revealed that she has been employed at the facility for 8 years, is familiar with Resident #4, and often assists Resident #4 with her lunch. S8CNA revealed that the Resident is served ice cream on occasion when the kitchen serves a dessert that does not align with the Resident #4's diet. S8CNA confirmed that Resident #4 is not served ice cream daily with lunch. In an interview on 12/03/2025 at 1:30 p.m., S2DON stated that if a Resident is to receive special dietary foods from the kitchen, it should be reflected on the resident's dietary card. Review of Resident #4's 12/03/2025 lunch dietary card with S2DON at this time. S2DON confirmed that Resident #4's order for 4 ounces of ice cream daily is not reflected on her dietary card and should be. S2DON acknowledged Resident #4 did not receive the nutritional intervention of ice cream daily with lunch, as ordered, and should have.</p>		

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<p>F 0802</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service.</p> <p>Based on observations, interviews, and record review, the facility failed to ensure that dietary support personnel were competent to safely and effectively perform the functions of the food and nutrition service. This deficient practice had the potential to affect the 89 residents who were prepared and served meals from the kitchen. During the initial tour of the kitchen on 12/01/2025 at 09:00 a.m., revealed no documentation reflecting dishwasher temperatures and sanitation checks were being performed routinely in the kitchen. In an interview on 12/01/2025 at 10:45 a.m., S6Dietary revealed he had been employed at the facility for about 3 months and is a dietary aide in the kitchen. S6Dietary revealed he was not trained on how to properly wash and sanitize dishes. S6Dietary revealed he did not know how to set up a 3-compartment sink. S6Dietary confirmed he had never checked the dishwasher temperature or sanitizer level when using the dishwasher; therefore, he had never recorded dishwasher temperatures or sanitizer levels. In an interview on 12/01/2025 at 10:50 a.m., S5Dietary revealed she had been employed at the facility for 1 year and had worked as a CNA until approximately two weeks ago, when she started her new role as a cook in the kitchen. S5Dietary revealed she was not trained on how to properly wash and sanitize dishes, including setting up a 3-compartment sink, checking sanitizer in a 3-compartment sink, or checking sanitizer levels in the dishwasher. S5Dietary confirmed she does not check or record sanitizer levels when handwashing or using the dishwasher, but should. On 12/01/2025 at 11:00 a.m., Observation of S4Cook preparing pureed Broccoli revealed S4Cook did not follow any recipe or measurements during the process. In an interview on 12/01/2025 at 12:30 p.m., S4Cook revealed she had been employed at the facility for three to four months and had been cooking at the facility for about two months. S4Cook revealed she was not trained to follow a recipe when preparing pureed food. S4Cook revealed that she was trained to check the temperature of food before serving, but was not educated on the appropriate temperatures for each food. In an interview on 12/02/2025 at 09:45 a.m. S5Dietary revealed she does not follow recipes when pureeing food. S5Dietary revealed she was not trained to follow recipes when preparing puree. S5Dietary revealed that she was not trained to check the temperature of food after cooking or before serving. S5Dietary revealed that she was informed by S3DM yesterday morning, 12/01/2025, upon starting her shift that she needed to check the food temperatures. S3Dietary revealed, prior to yesterday, 12/01/2025, she had never checked the temperatures of the food she prepared before serving food to the residents in the facility. Review of S4Cook, S5Dietary, S6Dietary, personnel files revealed no documentation of training specific to tasks performed by dietary staff to ensure they can safely and effectively carry out the functions of the food and nutrition service. In an interview on 12/01/2025 at 09:30 a.m. S3DM confirmed that food temperatures are not being monitored and recorded per policy, and that they should be. S3DM confirmed that she has a dietary manager should be checking food temperature logs, dishwashing logs, and freezer/cooler logs to ensure they are being completed daily, and she has not been. In an interview on 12/03/2025 at 12:40 p.m., S7Cook revealed she had been employed at facility for two weeks and is a cook in the kitchen. S7Cook further revealed she does not follow a recipe when she prepares pureed food. In an interview on 12/01/2025 at 1:45 p.m., S1Administrator revealed there has been a high turnover rate in the kitchen, and the majority of the dietary staff are new. S1Administrator further revealed that the dietary manager is responsible for training. In an interview on 12/03/2025 at 4:08 p.m., the above findings were discussed with S1Administrator. S1Administrator acknowledged that a lack of training was identified among dietary personnel.</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations and interviews, the facility failed to ensure that pureed food was prepared using methods that preserved its nutritional value. The facility failed to follow a recipe regarding portion size and ingredients while preparing pureed food, thereby compromising the nutritional adequacy of the meal for all 7 residents on a puree diet. Review of facility policy titled Puree Food Preparation revised 09/01/2024, revealed in part. It is the policy of this facility to provide puree food that has been prepared in a manner to conserve nutritive value, palatable flavor, and attractive appearance. 6. Resident receiving puree diets should always receive portions equivalent to those served on the regular or therapeutic diet ordered per policy and procedure. 7. Puree Food Preparation Guidelines per serving: Vegetables (leaf, stem, or flower): Add 2 tablespoons mashed potato flakes. Review of facility approved recipe: Lemon Broccoli (#36865-P.[NAME] Broccoli Lemon 1/2 Cup) Week 1 revealed in part. 1 serving size was 1/2 cup of broccoli. Recipe yielded 3 1/2 cups of Lemon Broccoli for 7 residents. Instructions: Measure the number of servings using the prepared recipe portion. Drain well to minimize the use of thickener to obtain the appropriate consistency. Place in a blender or food processor. Add liquid, if needed (ex, reserved liquid, broth, milk, gravy, or sauce), to assist with pureeing. Puree with a blender or food processor until smooth. If needed, gradually add thickener. EX. Mashed potato flakes, cream of rice, or commercial thickener. During the return visit to the kitchen on 12/01/2025 at 10:20 a.m., S3 DM stated that the facility had 7 residents on a puree diet. On 12/01/2025 at 11:00 a.m., observation of S4Cook preparing lemon Broccoli puree. Observation revealed the following: S4Cook broke up four pieces of sliced bread in the food processor, then added two scoops of broccoli from an unmeasured metal spoon and placed it in the food processor. S4Cook adds an unmeasured amount of liquid labeled apple juice from a juice pitcher into the food processor and mixes the ingredients. Once mixed, S4Cook attempts to stand her spoon in the food mixture. S4Cook adds two more slices of bread to the puree and mixes. S4Cook adds two unmeasured scoops of broccoli and three slices of bread to the food processor and mixes. S4Cook adds two more unmeasured scoops of broccoli to the processor, along with an unmeasured amount of apple juice, and mixes. S4Cook then added 4 more pieces of sliced bread and mixed. Broccoli puree was then placed on the steam table. In an interview on 12/01/2025 at 12:30 p.m., S4Cook revealed she has been employed at the facility for about 4 months and has been a cook there for about 2 months. S4Cook revealed she was not trained to follow a recipe when preparing pureed food. S4Cook confirmed that she does not follow any recipe when preparing pureed food. In an interview on 12/01/2025 at 12:47 p.m., S3DM stated that dietary staff do not follow recipes when pureeing food and added, It's just common sense. S3DM confirmed that dietary staff do not follow recipes when preparing pureed food, and should.</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>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</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>Based on observation, interview, and record review, the facility failed to maintain a clean and sanitary kitchen and failed to store food in accordance with professional standards for food service safety. This deficient practice had the potential to affect all 89 residents who received meals from the kitchen. The facility failed to ensure:</p> <ol style="list-style-type: none"> 1. Dish washing machine temperature and sanitizer status are monitored and logged daily. 2. Coolers and freezer temperatures are monitored and logged daily. 3. Food temperatures are recorded daily to ensure food is at the proper temperature before trays are assembled. 4. Dietary staff wore hair restraints while preparing food. <p>Review of facility policy titled Dietary Personal Hygiene, revised 09/1/2024, revealed in part. It is the policy of this facility to utilize the following guidelines for employee personal hygiene to prevent contamination of food by food service employees.</p> <ol style="list-style-type: none"> 4. All dietary staff must wear hair restraints (e.g. hairnet, hat, and or beard restraint) to prevent hair from contacting food. <p>Review of facility policy titled Record of Food Temperatures, revised 09/01/2024, revealed in part. It is the policy of this facility to record food temperatures daily to ensure food is at the proper serving temperature (s) before trays were assembled.</p> <ol style="list-style-type: none"> 6. Measure and record the temperatures for each food product and milk at all meals. Record the temperature on the daily temperature log. <p>Review of facility policy titled Monitoring of Cooler/Freezer Temperature, revised 09/01/2024, revealed in part. It is the policy of this facility to maintain temperatures of coolers and freezers at the appropriate temperature to promote food safety. Temperatures will be checked and logged at least twice per by designated personnel.</p> <p>Review of facility policy titled Dishwasher Temperature revised 09/10/2024, revealed in part. It is the policy of this facility to ensure dishes and utensils are clean under sanitary conditions through adequate dishwasher temperatures.</p> <ol style="list-style-type: none"> 5. Chemical Solutions shall be maintained at the correct concentration, based on periodic testing, at least once per shift, and for the effective contact time according to manufactures guidelines. Results of concentration shall be recorded. 6. Water temperature shall be measured and recorded prior to each meal/and or after dishwasher has been emptied or refilled for cleaning purposes. <ol style="list-style-type: none"> 1. During the initial tour of the kitchen on 12/01/2025 at 09:00 a.m., a lack of documented logs for the kitchen dishwashing machine and temperature status was identified. In an interview conducted at this time, S3DM confirmed dish washing temperature checks and sanitizer checks are not logged daily in the kitchen, and should be. 2. On 12/01/2025 at 09:28 a.m. review of Dietary Daily Temperature log binder for November 2025 with S3DM revealed there was no documentation that cooler or freezer temperature checks were performed as follows: 11/21/2025- midafternoon temperatures or dinner temperatures 11/22/2025 - dinner temperatures 11/23/2025 - opening temperatures, midafternoon temperatures, or dinner temperatures 11/24/2025 - opening temperatures, midafternoon temperatures, or dinner temperatures 11/25/2025 - opening temperatures, midafternoon temperatures, or dinner temperatures 11/26/2025 - opening temperatures, midafternoon temperatures, or dinner temperatures 11/27/2025- opening temperatures, midafternoon temperatures, or dinner temperatures 11/28/2025- opening temperatures, midafternoon temperatures, or dinner temperatures 11/29/2025 - opening temperatures, midafternoon temperatures, or dinner temperatures 11/30/2025- opening temperatures, midafternoon temperatures, or dinner temperatures <p>In an interview on 12/01/2025 at 09:29 a.m. S3DM confirmed that freezer and cooler temperatures are not being monitored and recorded daily, and should be.</p> <ol style="list-style-type: none"> 3. On 12/01/2025 at 09:30 a.m., review of the Dietary Daily Temperature log for November 2025 with S3DM revealed there was no documentation that food temperature checks were performed as follows: 11/10/2025 - dinner 11/21/2025- lunch or dinner 11/22/2025- lunch or dinner 11/23/2025- lunch or dinner 11/24/2025- lunch or dinner 11/25/2025 - lunch or dinner 11/26/2025- lunch or dinner 11/27/2025 - Breakfast, lunch, or dinner 11/28/2025 - breakfast, lunch, or dinner 11/29/2025 - breakfast, lunch, or dinner 11/30/2025- breakfast, lunch, or dinner <p>In an interview on 12/01/2025 at 09:30 a.m. S3DM confirmed that food temperatures are not being monitored and recorded per policy, and that they should be.</p> <ol style="list-style-type: none"> 4. An observation on 12/01/2025 at 10:45 a.m. revealed S6Dietary in the kitchen preparing sandwiches. S6Dietary observed with facial hair approximately 1.5 centimeters (cm) long without a proper facial hair covering in place. <p>An observation on 12/01/2025 at 12:23 p.m., revealed S6Dietary handling food without a proper facial hair covering in place.</p> <p>In an interview on 12/01/2025 at 12:23 p.m., S6Dietary revealed he does not wear a facial hair covering when handling, serving, or preparing food. S6Dietary confirmed he was not wearing a facial hair covering, but should have been.</p> <p>In an interview on 12/01/2025 at 12:47 p.m., S3DM confirmed S6Dietary was not wearing a facial hair covering while handling food, and should have</p>		