

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195588	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/25/2026
NAME OF PROVIDER OR SUPPLIER Oak Lane Wellness & Rehabilitative Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1400 W Magnolia Eunice, LA 70535	

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 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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review and interview, the facility failed to ensure the resident's plan of care was implemented as ordered through five consecutive months by failing to follow physician orders for completing wound care and monitor swelling for 1 (Resident #2) out of 3 (Resident #1, Resident #2, and Resident #3) sampled residents. Findings: Review of Resident #2's electronic medical record revealed she was admitted to the facility on [DATE] with diagnoses which included, but were not limited to, Alzheimer's disease and dementia. Review of Resident #2's November 2025 physician's order and TAR (Treatment Administration Order) revealed the following order dated 11/07/2025: Skin tear to R (right) forearm. Clean with NS (normal saline), apply TAO (triple antibiotic ointment), cover with a dry dressing daily until healed. The TAR failed to reveal evidence that treatment for the skin tear to the right forearm was administered for the resident for November 2025. Review of Resident #2's December 2025 physician's order and TAR revealed the following in part: Order dated 12/06/2025: Clean skin tear to right elbow with NS, then apply TAO, and a covered dressing q day until healed. The TAR failed to include nurses' initials or evidence that the treatment was administered on the dates of 12/08/2025 and 12/31/2025. Order dated 12/11/2025: Cleanse laceration to mid forehead with normal saline and apply triple antibiotic QD (every day), cover with dressing until resolved. The TAR failed to include nurses' initials or evidence that the treatment was administered for the resident on the date of 12/31/2025. Order dated 12/12/2025: Bacitracin External Ointment 500 unit/gram, apply to forehead topically two times per day for wound to forehead. Cleanse forehead with NS, apply Bacitracin and cover with dry dressing until healed. The TAR failed to include nurses' initials or evidence that the treatment was administered for the resident on the dates of 12/23/2025 HS (at bedtime), 12/29/2025 HS, and 12/31/2025 AM (morning). Review of Resident #2's January 2026 physician's orders and TAR revealed the following order dated 01/01/2026: Cleanse skin tear to webbing of left hand outer middle finger and ringer finger with normal saline and apply triple antibiotic ointment, cover with dressing QD until healed. The TAR failed to include nurses' initials or evidence that the treatment was administered for the resident on the date of 01/08/2026. Review of Resident #2's February 2026 physician's orders and TAR revealed the following order dated 02/26/2026: Cleanse skin tears to right outer pinky finger with normal saline and apply triple antibiotic QD with cover dressing until resolved. The TAR failed to include nurses' initials or evidence that the treatment was administered for the resident on the date of 02/27/2026. Review of Resident #2's March 2026 physician's orders and TAR revealed the following orders dated 03/10/2026: Cleanse skin tear to right outer eye with normal saline and apply triple antibiotic ointment with cover dressing QD. The TAR failed to include nurses' initials or evidence that the treatments were administered for the resident on the dates of 03/19/2026 and 03/22/2026. Cleanse skin tear to right outer hand with normal saline and apply triple antibiotic ointment with cover dressing QD until healed. The TAR failed to include nurses' initials or evidence that the treatments were administered for the resident on the dates of 03/19/2026, 03/22/2026 and 03/24/2026. Monitor swelling to right knee q shift three times a day. The TAR failed to include nurses' initials or evidence that monitoring of the swelling was done for the (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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>resident on the dates of 03/19/2026 AM, 03/19/2026 MID (midday), 03/22/2026 AM, and 03/22/2026 MID. On 03/25/2026 at 9:00 a.m., an interview and record review was conducted with S1DON who was responsible for nursing services in the facility. She reviewed Resident #2's November 2025 TAR and confirmed there was no evidence the nurses administered the treatment of resident's skin tear to right forearm. S1DON stated the order may be on Resident #2's MAR (Medication Administration Record) for November 2025, MAR was reviewed, and she confirmed there was no evidence the nurses administered the treatment of resident's skin tear to right forearm. S1DON stated she would further check Resident #2's electronic health record. S1DON also reviewed Resident #2's December 2025, January, February and March 2026 TAR, and confirmed that the TARs failed to include nurses' initials or evidence that the treatments were administered for the above dates. S1DON confirmed the resident's treatments and monitoring were not done as ordered in December 2025, January 2026, February 2026 and March 2026. On 03/25/2026 at 10:00 a.m., another interview was conducted with S1DON who confirmed there was no documented evidence that treatments were administered as ordered for Resident #2's skin tear to right forearm for the month of November 2025.</p>		