

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195614	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/21/2024
NAME OF PROVIDER OR SUPPLIER Covenant Home		STREET ADDRESS, CITY, STATE, ZIP CODE 5919 Magazine Street New Orleans, LA 70115	

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 0554</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>Allow residents to self-administer drugs if determined clinically appropriate.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 17453</p> <p>Based on observations, record reviews, and interviews, the facility failed to assess a resident for self-administration of medications for 1 (Resident #32) of 3 (Resident #32, Resident #39, and Resident #60) residents investigated for accidents.</p> <p>Findings:</p> <p>Review of the facility's policy titled Self-Administration of Medication, with a review date of March 2024, revealed, in part, self-medication consent and release form must be obtained from resident and/or the responsible party. Director of Nursing will complete a self-medication assessment to ensure residents ability to self-medicate. An order must be obtained from resident's physician to keep medication in room.</p> <p>Resident #32 was admitted to the facility on [DATE] with diagnosis of, in part, Gastro Esophageal Reflux Disease.</p> <p>Review of Resident #32's Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 04/03/2024 revealed, in part, Resident #32 had a Brief Interview for Mental Status score of 15, which indicated Resident #69 had intact cognition.</p> <p>Observation on 05/19/2024 at 10:12 a.m. revealed there were 6 disposable medicine cups on Resident #32's bedside table. The 6 disposable medicine cups contained different colored tablets. Resident #32 identified the different colored tablets as tums (a medication which treats heartburn, indigestion or an upset stomach caused by too much stomach acid.) Resident #32 stated she kept a bottle of tums in her dresser drawer and she kept some of the tums in disposable medicine cups at her bedside.</p> <p>Observation on 05/20/2024 at 9:12 a.m. revealed there were 6 disposable medicine cups on Resident #32's bedside table. The 6 disposable medicine cups contained different colored tablets.</p> <p>In an interview on 05/20/2024 at 9:22 a.m., S7Certified Nursing Assistant (CNA) confirmed Resident #32 had 6 disposable medicine cups on her bedside table with different colored tablets. S7CNA indicated Resident #32's granddaughter brought the tablets.</p> <p>Observation on 05/20/2024 at 12:05 p.m. revealed Resident #32 was in her bed and the 6 disposable medicine cups with different colored tablets were on Resident #32's bedside table.</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 0554</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>In an interview on 05/20/2024 at 12:07 p.m., S5Licensed Practical Nurse (LPN) indicated S7CNA notified her that Resident #32 had tums in her room. S5LPN indicated she was not aware Resident #32 self-administered tums. S5LPN further indicated Resident #32 did not have an order for tums.</p> <p>In an interview on 05/20/2024 at 12:10 p.m., S2Director of Nursing (DON) indicated Resident #32 was not assessed for self-administration of medications and indicated Resident #32 should not have medications at the bedside.</p>		

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<p>F 0563</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 receive visitors of his or her choosing, at the time of his or her choosing.</p> <p>34608</p> <p>Based on observation, record review, and interviews, the facility failed to allow residents unrestricted visitation. This deficient practice was identified for 4 (Resident #30, Resident #44, Resident #62, and Resident #15) of 4 (Resident #30, Resident #44, Resident #62, and Resident #15) sampled residents reviewed for visitation.</p> <p>Findings:</p> <p>Observation on 05/19/2024 at 9:30 a.m. revealed a sign was posted on the door to the entrance of the residents' living area which read Visitation Hours 10:00 a.m. to 8:00 p.m.</p> <p>Review of the facility's Visitation Policy updated March 2024 revealed, in part, the intent of the policy was to maintain security, dignity, and the rights of all the residents of the facility. Further review of the policy revealed scheduling of visits can be arranged for the convenience of the family member so that bath time, therapy, meals and care shall not interfere with valuable visitation time and posted visitation is 10:00 a.m. through 8:00 p.m. to allow our residents maximum comfort and dignity in their home.</p> <p>Resident #30</p> <p>In an interview on 05/20/2024 at 9:30 a.m., S6AgencyCertified Nursing Assistant (CNA) stated Resident #30 stayed in her room most of the time but she does go to the lobby for family visits. S6AgencyCNA further stated the facility required Resident #30's family to make an appointment to visit Resident #30 in the lobby of the facility.</p> <p>In an interview on 05/20/2024 at 11:40 a.m., Resident #30 confirmed her family had to make an appointment with the facility to visit her and further stated the visits were held in the lobby.</p> <p>In a Confidential Interview on 05/21/2024 at 9:56 a.m., the interviewee stated there had been several complaints from family members in regards to having to schedule appointments to visit residents and the limited visitation times. The interviewee further stated families and residents wish not to be interviewed in fear of retaliation.</p> <p>Resident #44</p> <p>In an interview on 05/20/2024 at 10:30 a.m., Resident #44 indicated residents were not allowed to go out on pass or have visitors after the front office was closed.</p> <p>Resident #62</p> <p>Observation on 05/21/2024 at 10:26 a.m. revealed a visitor in the lobby area waiting to visit Resident #62.</p> <p>(continued on next page)</p>		

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<p>F 0563</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>In an interview on 05/21/2024 at 10:27 a.m., Resident #62's visitor stated the facility required an appointment be made at least 24 hours in advance and the visits are to be scheduled between the hours of 10:00 a.m. and 5:00 p.m. Resident #62's visitor stated the facility encourages the visitors to visit in the lobby or outside with the resident.</p> <p>Resident #15</p> <p>Observation on 05/21/2024 at 10:29 a.m. revealed 2 visitors visiting with Resident #15 in a room near the lobby.</p> <p>In an interview on 05/21/2024 at 10:30 a.m., Resident #15's daughter stated she was required to make an appointment to visit her mom. Resident #15's daughter stated she usually visited her mom on Mondays but when she attempted to make an appointment on-line all appointments allowed for Monday were full. Resident #15's daughter further stated there was an on-line system and facility required visits to be made between the hours of 10:00 a.m. and 5:00 p.m.</p> <p>In an interview on 05/21/2024 at 9:33 a.m., S1Administrator indicated the decision was made to set the facility's visiting hours from 10:00 a.m. to 8:00 p.m. for all residents except hospice residents. S1Administrator further indicated resident's family members are required to make appointments to visit between the hours of 10:00 a.m. to 8:00 p.m. because the facility feels these are times that would not interfere with resident care.</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>Note: The nursing home is disputing this citation.</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 50452</p> <p>Based on observations and interview, the facility failed to:</p> <ol style="list-style-type: none"> 1. Ensure food available for use was dated, labeled, stored and not left open to air; 2. Ensure food items were not placed directly on the freezer floor without a barrier; 3. Ensure expired food was discarded properly; and, 4. Ensure kitchen equipment and ceiling fans were clean. <p>Findings:</p> <ol style="list-style-type: none"> 1. Observation on [DATE] at 9:10 a.m. of the walk-in cooler revealed, in part, the following: <ol style="list-style-type: none"> 1. An opened and undated box of homestyle chicken breast chunks; 2. An opened and undated 5.5 oz. opened fig preserve; 3. An opened and undated Ziploc bag of cubed cheese; 4. 2 opened and undated bags of celery stalks; 5. An undated 3lb bag of cubed cheese; 6. A Ziploc bag of sliced ham dated [DATE] opened to air; and, 7. A Ziploc bag of sliced turkey dated [DATE] opened to air <p>In an interview on [DATE] at 9:10 a.m., S4Dietary Supervisor (DS) confirmed all of the above items were found opened and undated. S4DS indicated food should have been dated and labeled when opened.</p> <ol style="list-style-type: none"> 2. Observation on [DATE] at 9:10 a.m. of the walk-in freezer revealed a 10 pound (lb.) roll of ground beef was on the freezer floor. The bottom shelf of the walk-in freezer was slanted which allowed the rolls of ground beef to roll off and on to the floor. <p>In an interview on [DATE] at 9:10 a.m., S4DS confirmed the 10 lb. roll of ground meat on the floor in the walk-in freezer. S4DS indicated the bottom shelf was slanted which caused 10lb. roll of ground meat to roll on the floor. S4DS further indicated food should not be stored on the freezer floor.</p> <ol style="list-style-type: none"> 3. Observation on [DATE] at 9:10 a.m. revealed 1 opened box of cinnamon rolls with an expiration date of [DATE] in the walk-in freezer. Further observation revealed 1- Hershey's syrup chocolate flavor bottle with an expiration date of [DATE] in the walk-in cooler. <p>(continued on next page)</p>		

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<p>F 0814</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Dispose of garbage and refuse properly.</p> <p>50452</p> <p>Based on observation and interview, the facility failed to dispose of garbage and refuse properly.</p> <p>Findings:</p> <p>Observation on 05/19/2024 at 9:10 a.m. revealed the dumpster had a large crack in the lid.</p> <p>In an interview on 05/19/2024 at 9:10 a.m., S4DietarySupervisor (DS) confirmed the above documented findings. S4DS indicated the dumpster lid had been cracked for approximately 3 months.</p>		