

John Bel Edwards
GOVERNOR



Rebekah E. Gee MD, MPH
SECRETARY

State of Louisiana
Louisiana Department of Health
Health Standards Section

October 2, 2019

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
7019 0140 0000 3682 8030

Attn: Mr. Bob Duet, Administrator
Raceland Manor Nursing Home, Inc
4302 Hwy 1
Raceland, LA 70394

RE:South Lafourche Nursing & Rehab
Event ID:7LTU11 Provider ID: 195305 Medicaid ID: 1520284 State ID: NH0002718

Dear Mr. Duet:

On 02/27/2019, a Complaint survey, LA00050972, was conducted at the above referenced facility. At that time it was determined that the facility was out of compliance with the federal and/or state rules for Nursing Homes. Specifically, the facility had deficient practices in the following areas:

~~Reporting Of Alleged Violations~~ Fed Reg 0609.5483, 12(c)(1)(4) - Reporting Of Alleged Violations S-S= D

~~This office has determined that your facility's failure to comply with these rules constitutes Class "C" violations pursuant to a final rule published by this Department in November of 2013, in that the above referenced facility's actions or inactions created a potential for harm by directly threatening the health, safety, rights or welfare of a resident(s). Additionally, considering the findings of the previous survey dated October 25, 2018, these Class "C" violations constitute repeat violations. Further, this facility has been previously cited for a Class "C" violation that occurred within eighteen (18) months of this violation. As a result of these infractions, we are assessing this facility a Civil Fine of \$1,000.00 for the violations under F-0609, for this Class "C" violation, as referenced in this letter.~~

Therefore, the total amount of the Civil Fines assessed against this facility for this separate Class "C" violation, as referenced in this letter, is \$1,000.00.

Further details of these violations are included in the 02/27/2019 survey statement of deficiencies, Form CMS-2567 and/or State Form (previously received by this facility) which are incorporated by reference herein.

You may request an **Informal Reconsideration** of this decision to impose a civil fine. The request for Informal Reconsideration must be in writing and must be forwarded to the following address:

IDR Program Manager
LDH - Health Standards Section
P. O. Box 3767
Baton Rouge, LA 70821-3767

You may also submit your written request via email to: HSS.IDR-Sanction@la.gov.

Your request for Informal Reconsideration must be received by this office within ten (10) days from receipt of this notice letter and must include any documentation that you think demonstrates this determination was made in error. If a timely request for the Informal Reconsideration is received by this office, an Informal Reconsideration will be scheduled and you will be notified of the time and place. The reconsideration decision shall be based upon all documentation and oral testimony furnished by the provider to the department at the time of the Informal Reconsideration.

You also have the right to an **Administrative Appeal** regarding this decision. If you desire to appeal the proposed civil fine, you must file a written request within thirty (30) days after receipt of the written notice of the results of the Administrative Reconsideration. Your request for an Administrative Appeal must be forwarded to the following:

Division of Administrative Law
HH Section
Post Office Box 4189
Baton Rouge, LA 70821-4189

~~You may choose to waive or forego the right to an Administrative Reconsideration and proceed directly to an Administrative Appeal. If you choose this option, you must file a written request for an Administrative Appeal within thirty (30) days after receipt of this notice letter. Your request for an Administrative Appeal must be forwarded to the Division of Administrative Law, at the address cited in the paragraph above.~~

In accordance with La. R.S. 40:2199 (D), the facility shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond furnished shall provide in substance that it is furnished as security that the facility will prosecute its appeal, that any judgment against it, including court costs, will be paid or satisfied from the amount furnished, or that otherwise the surety is liable for the amount assessed against the facility.

Therefore, this facility must furnish a bond in the amount of **\$1,500.00.**

Pursuant to Louisiana Administrative Code, Title 48, Part I, Subpart 3, Chapter 46, Section 4641 E. 5. this facility may choose to file a devolutive appeal (pay the fine,

pending the outcome of all appeals).

The Department's decision to impose the civil fine becomes final and no administrative or judicial relief may be obtained if you fail to timely request an Informal Reconsideration and/or Administrative Appeal.

Please note that the request for an Informal Reconsideration does not constitute a request for an Administrative Appeal, nor does it extend the time limit for requesting an Administrative Appeal.

Also, please note that if you do not request an Administrative Reconsideration or an Administrative Appeal, this letter constitutes notice of this Department's final decision to impose a sanction. Once the delays for filing for an Administrative Reconsideration and/or Administrative Appeal have run, the decision to impose this Civil Fine becomes final and **you must remit your payment with the enclosed transmittal form within ten (10) days to:**

**LDHH Licensing Trust Funds
P.O. Box 734353
Dallas, TX 75373-4353**

Or, for overnight/courier service, to:

**J.P. Morgan Chase (TX1-0029)
Attn: LDH Licensing Trust Funds
62990
14800 Frye Road, 2nd Floor
Ft Worth, TX 76155**

Do not send your payment to the Health Standards Section, as this will result in delays in processing your payment.

Pursuant to a final rule published by this Department in Louisiana Register Vol. 39, No. 11
waive in November 2013, the facility may waive in writing the right to all administrative
reconsideration and appeal rights within 30 days from the date of receipt of the notice imposing
the civil monetary penalty. This waiver shall be forwarded to the Health Standards Section of
the department. You must notify Health Standards in writing on or before this date. If a facility
waives its right to all administrative reconsideration and appeal rights pursuant to the rule and
in accordance with the provisions of LAC 48.I. Chapter 46, Subchapter B §4613.C.2. and §4641
C., the Department shall reduce the civil monetary penalty for Class "C" violations by 50
percent, which shall be paid by the facility within 30 days of receipt of the notice imposing the
civil monetary penalty. This reduction only applies to Class "C" violations. Please send the
completed waiver form accompanied by the check or money order for the amount of \$500.00
that is due and owing to the attention of James Taylor at the above listed address.

Upon remittance, include a copy of this letter with the check and clearly indicate in the check memo space the date of the survey and that the check is for payment of a civil monetary penalty.

If you have any questions regarding this letter, please contact James H. Taylor, III at (225) 342-5457.

Sincerely,

Health Standards Section

BY: _____
Cecile D. Castello, R.N. BSN
Director

CDC\SWM

cc: File Copy
Hospital Program Desk
Cindy Pritchard, Financial Management

John Bel Edwards
GOVERNOR



Rebekah E. Gee MD, MPH
SECRETARY

State of Louisiana

Louisiana Department of Health
Health Standards Section

October 17, 2019

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED
7019 0140 0000 3682 8221**

Attn: Mr. Bob Duet, Administrator
South Lafourche Nursing & Rehab
146 E. 28th Street
Cutoff, Louisiana 70345

Re: South Lafourche Nursing & Rehab
Event ID: 0S9211 ID: 195305 Medicaid ID: 1520284 State ID: NH0002718

Dear Mr. Duet:

On 04/30/2019, a Complaint survey, LA00051560, was conducted at the above referenced facility. At that time it was determined that the facility was out of compliance with the federal and/or state rules for nursing facilities. Specifically, the facility had deficient practices in the following areas:

~~Fed F-0609-483~~ 12(c)(1)(4) - Reporting Of Alleged Violations S-S= E

This office has determined that your facility's failure to comply with this rule constitutes a Class "C" violation pursuant to a final rule published by this Department in November of 2018, in that the above referenced facility's actions or inactions created a potential for harm by directly threatening the health, safety, rights or welfare of a resident(s). Additionally, considering the findings of the previous survey dated October 25, 2018, and February 27, 2019 this Class "C" violation constitutes a **repeat violation**. Further, this facility has been previously cited for a Class "C" violation that occurred within eighteen (18) months of this violation. **As a result of this infraction, we are assessing this facility a Civil Fine of \$1,200.00 for the violation under Tag F-0609, for this Class "C" violation, as referenced in this letter.**

Therefore, the total amount of the Civil Fines assessed against this facility for this Class "C" violation, as referenced in this letter, is \$1,200.00.

Further details of these violations are included in the 04/30/2019 survey statement of deficiencies, Form CMS-2567 (previously received by this facility), which is incorporated by reference herein.

You may request an **Administrative Reconsideration** of this decision to impose a civil fine. The request for Administrative Reconsideration must be in writing and must be forwarded to the following address:

IDR Program Manager
LDH - Health Standards Section
P. O. Box 3767
Baton Rouge, LA 70821-3767

You may also submit your written request via email to: HSS.IDR-Sanction@la.gov.

Your request for Administrative Reconsideration must be received by this office within ten (10) days from receipt of this notice letter and must include any documentation that you think demonstrates this determination was made in error. If a timely request for the Administrative Reconsideration is received by this office, an Administrative Reconsideration will be scheduled and you will be notified of the time and place. The reconsideration decision shall be made on the basis of documents and shall include the survey report and statement of deficiencies and all documentation the facility submits to the department at the time of its request for reconsideration. Further, oral presentations can be made by department spokesmen and facility spokesmen at the time of the Administrative Reconsideration. The department shall notify the facility, in writing, of the results of the Administrative Reconsideration.

You also have the right to an **Administrative Appeal** regarding this decision. If you desire to appeal the proposed civil fine, you must file a written request within thirty (30) days after receipt of the written notice of the results of the Administrative Reconsideration. Your request for an Administrative Appeal must be forwarded to the following:

Division of Administrative Law
HH Section
Post Office Box 4189
Baton Rouge, LA 70821-4189

~~You may choose to waive or forego the right to an Administrative Reconsideration and proceed directly to an Administrative Appeal. If you choose this option, you must file a written request for an Administrative Appeal within thirty (30) days after receipt of this notice letter. Your request for an Administrative Appeal must be forwarded to the Division of Administrative Law, at the address cited in the paragraph above.~~

In accordance with La. R.S. 40:2009.11(D) or La. R.S. 40:2119(D), the facility shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond furnished shall provide in substance that it is furnished as security that the facility will prosecute its appeal, that any judgment against it, including court costs, will be paid or satisfied from the amount furnished, or that otherwise the surety is liable for the amount assessed against the facility.

Therefore, this facility must furnish a bond in the amount of \$1,800.00 to request an appeal.

Pursuant to Louisiana Administrative Code, Title 48, Part I, Subpart 3, Chapter 46, Section 4641.E(5) this facility may choose to file a devolutive appeal (pay the fine, pending the outcome of all appeals).

The Department's decision to impose the civil fine becomes final and no administrative or judicial relief may be obtained if you fail to timely request an Administrative Reconsideration and/or Administrative Appeal.

Please note that the request for an Administrative Reconsideration does not constitute a request for an Administrative Appeal.

Also, please note that if you do not request an Administrative Reconsideration or an Administrative Appeal, this letter constitutes notice of this Department's final decision to impose a sanction. Once the delays for filing for an Administrative Reconsideration and/or Administrative Appeal have run, the decision to impose this Civil Fine becomes final and **you must remit your payment with the enclosed transmittal form within ten (10) days to:**

LDHH Licensing Trust Funds
P.O. Box 734353
Dallas, TX 75373-4353

Or, for overnight/courier service, to:

JPMorgan Chase
ATTN: LDHH Licensing Trust Funds
#62990
14800 Frye Road, 2nd Floor
Ft Worth, TX 76155

Do not send your payment to the Health Standards Section as this will result in delays in processing your payment.

Pursuant to a final rule published by this Department in Louisiana Register Vol. 39, No. 11 November 20, 2013, the facility may waive in writing the right to all administrative reconsideration and appeal rights within 30 days from the date of receipt of the notice imposing the civil monetary penalty. This waiver shall be forwarded to the Health Standards Section of the department. You must notify Health Standards in writing on or before this date. If a facility waives its right to all administrative reconsideration and appeal rights pursuant to the rule and in accordance with the provisions of LAC 48.I Chapter 97, Subchapter C §9741.A.1, the Department shall reduce the civil monetary penalty for Class "C" violations by 50 percent, which shall be paid by the facility within 30 days of receipt of the notice imposing the civil monetary penalty. This reduction only applies to Class "C" violations. Please send the completed waiver form accompanied by the check or money order for the amount of \$600.00 that is due and owing to the department (attention James Taylor) at the above listed address.

Upon remittance, include a copy of this letter with the check and clearly indicate in the check memo space the date of the survey and that the check is for payment of a civil monetary penalty.

If you have any questions regarding this letter, please contact James H. Taylor, III at (225) 342-5457.

Sincerely,

Health Standards Section

By: _____
Cecile D. Castello, BSN, RN
Deputy Assistant Secretary
Louisiana Department of Health

cc: File Copy
Nursing Home Program Desk
Cindy Pritchard, Financial Management

John Bel Edwards
GOVERNOR



Stephen R. Russo, JD
INTERIM SECRETARY

State of Louisiana
Louisiana Department of Health
Health Standards Section

March 3, 2020

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
7019 0700 0000 9572 1262

Attn: Mr. Bob Duet, Administrator
Raceland Manor Nursing Home, Inc.
4302 Hwy. 1
Raceland, LA 70394

Re: South Lafourche Nursing & Rehab
Event ID: JSE111 ID: 195305 Medicaid ID: 1520284 State ID: NH0002718

Dear Mr. Duet:

On 09/26/2019, a Standard Health survey was conducted at the above-referenced facility. At that time it was determined that the facility was out of compliance with the federal and/or state rules for nursing facilities. Specifically, the facility had deficient practices in the following areas:

~~of Alleged~~ F-609; 42 CFR 483.12(c)(1) & (4) - Report of Alleged Violations; S-S = D
~~of S-S = E~~ F-880; 42 CFR 483.80 - Infection Control; S-S = E

~~Facility's~~ This office has determined that your facility's failure to comply with these rules constitutes separate Class "C" violations pursuant to a final rule published by this Department in November of 2013, in that the above-referenced facility's actions or inactions created a potential for harm by directly threatening the health, safety, rights, or welfare of a resident(s). Additionally, considering the findings of the previous survey dated October 25, 2018, these Class "C" violations constitute **repeat violations**. Further, this facility has been previously cited for a Class "C" violation that occurred within eighteen (18) months of this violation. **As a result of these infractions, we are assessing this facility a Civil Fine of \$1,000.00 for the violations under Tag F-609, a Civil Fine of \$1,200.00 for the violations under Tag F-880 for these Class "C" violations, as referenced in this letter.**

Therefore, the total amount of the Civil Fines assessed against this facility for these separate Class "C" violations, as referenced in this letter, is **\$2,200.00**.

Further details of these violations are included in the survey statement of deficiencies, Form CMS-2567 (previously received by this facility), which is incorporated by reference herein.

You may request an **Administrative Reconsideration** of this decision to impose a civil fine. The request for Administrative Reconsideration must be in writing and must be forwarded to the following address:

IDR Program Manager
LDH - Health Standards Section
P. O. Box 3767
Baton Rouge, LA 70821-3767

You may also submit your written request via email to: HSS.IDR-Sanction@la.gov.

Your request for Administrative Reconsideration must be received by this office within ten (10) days from receipt of this notice letter and must include any documentation that you think demonstrates this determination was made in error. If a timely request for the Administrative Reconsideration is received by this office, an Administrative Reconsideration will be scheduled and you will be notified of the time and place. The reconsideration decision shall be made on the basis of documents and shall include the survey report and statement of deficiencies and all documentation the facility submits to the department at the time of its request for reconsideration. Further, oral presentations can be made by department spokesmen and facility spokesmen at the time of the Administrative Reconsideration. The department shall notify the facility, in writing, of the results of the Administrative Reconsideration.

You also have the right to an **Administrative Appeal** regarding this decision. If you desire to appeal the proposed civil fine, you must file a written request within thirty (30) days after receipt of the written notice of the results of the Administrative Reconsideration. Your request for an Administrative Appeal must be forwarded to the following:

Division of Administrative Law
HH Section
Post Office Box 4189
Baton Rouge, LA 70821-4189

You may choose to waive or forego the right to an Administrative Reconsideration and proceed directly to an Administrative Appeal. If you choose this option, you must file a written request for an Administrative Appeal within thirty (30) days after receipt of this notice letter. Your request for an Administrative Appeal must be forwarded to the Division of Administrative Law, at the address cited in the paragraph above.

In accordance with La. R.S. 40:2009.11(D) or La. R.S. 40:2119(D), the facility shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond furnished shall provide in substance that it is furnished as security that the facility will prosecute its appeal, that any judgment against it, including court costs, will be paid or satisfied from the amount

furnished, or that otherwise the surety is liable for the amount assessed against the facility.

Therefore, this facility must furnish a bond in the amount of **\$3,300.00** to request an appeal.

Pursuant to Louisiana Administrative Code, Title 48, Part I, Subpart 3, Chapter 46, Section 4641.E(5) this facility may choose to file a devolutive appeal (pay the fine, pending the outcome of all appeals).

The Department's decision to impose the civil fine becomes final and no administrative or judicial relief may be obtained if you fail to timely request an Administrative Reconsideration and/or Administrative Appeal.

Please note that the request for an Administrative Reconsideration does not constitute a request for an Administrative Appeal.

Also, please note that if you do not request an Administrative Reconsideration or an Administrative Appeal, this letter constitutes notice of this Department's final decision to impose a sanction. Once the delays for filing for an Administrative Reconsideration and/or Administrative Appeal have run, the decision to impose this Civil Fine becomes final and **you must remit your payment with the enclosed transmittal form within ten (10) days to:**

LDHH Licensing Trust Funds
P.O. Box 734353
Dallas, TX 75373-4353

Or, for overnight/courier service, to:

JPMorgan Chase (TX1-0029)
ATTN: LDHH Licensing Trust Funds
Box #734353
14800 Frye Road, 2nd Floor
Ft Worth, TX 76155

Do not send your payment to the Health Standards Section as this will result in delays in processing your payment.

Pursuant to a final rule published by this Department in Louisiana Register Vol. 39, No. 11 November 20, 2013, the facility may waive in writing the right to all administrative reconsideration and appeal rights within 30 days from the date of receipt of the notice imposing the civil monetary penalty. This waiver shall be forwarded to the Health Standards Section of the department. You must notify Health Standards in writing on or before this date. If a facility waives its right to all administrative reconsideration and appeal rights pursuant to the rule and in accordance with the provisions of LAC 48:4613(C)(2), the Department shall reduce the civil monetary penalty for **Class "C" violations** by 50 percent, which shall be paid by the facility within 30 days of receipt of the notice imposing the civil monetary penalty. This reduction only applies to **Class "C"**

violations. Please send the completed waiver form accompanied by the check or money order for the amount of \$1,100.00 that is due and owing to the department (attention Tammy Walton) at the above-listed address.

Upon remittance, include a copy of this letter with the check and clearly indicate in the check memo space the date of the survey and that the check is for payment of a civil monetary penalty.

If you have any questions regarding this letter, please contact the Sanction Desk at (225) 342-9937.

Sincerely,
Health Standards Section

By: _____
Cecile D. Castello, BSN, RN
Deputy Assistant Secretary
Louisiana Department of Health

cc: File Copy
Nursing Home Program Desk
Cindy Pritchard, Financial Management