

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 09/03/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195176	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 04/30/2019
NAME OF PROVIDER OR SUPPLIER PARK PLACE HEALTHCARE, LLC			STREET ADDRESS, CITY, STATE, ZIP CODE 535 COMMERCE STREET GRETNA, LA 70056		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
F 000	INITIAL COMMENTS Complaint # LA00051604. No deficiencies cited as a result of this complaint.	F 000			
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE			TITLE		(X6) DATE

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.

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NAME OF PROVIDER OR SUPPLIER PARK PLACE HEALTHCARE, LLC			STREET ADDRESS, CITY, STATE, ZIP CODE 535 COMMERCE STREET GRETNA, LA 70056		
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K 000	INITIAL COMMENTS Belle Vie Living Centers in compliance with the requirements of Title 42 Code of Federal Regulations, Part 483.70(a) (Life Safety Code). The facility is sprinklered, licensed for 89 beds and a census of 84 at time of survey.	K 000			
K 521 SS=C	HVAC CFR(s): NFPA 101 HVAC Heating, ventilation, and air conditioning shall comply with 9.2 and shall be installed in accordance with the manufacturer's specifications. 18.5.2.1, 19.5.2.1, 9.2 This REQUIREMENT is not met as evidenced by: Based on visual observation the facility failed to assure that the heating, ventilation and air conditioning system was installed in accordance with NFPA 90A. The system could re-circulate smoke originating from one part of the building into other parts of the building otherwise unaffected. The deficient practice had the potential to affect 75 of 79 residents. The Bell Vie corridors are deficient in being used as a return air plenum not the star corridors. Findings: During the facility tour, between the hours of 9:30a.m. and 1:30p.m. the Bell Vie Corridors were observed being used as the return air	K 521			

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TITLE

(X6) DATE

06/05/2019

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K 521	Continued From page 1 plenum for the facility HVAC system. Interview with the plant director revealed the facility was aware the HVAC system was using the corridors as a return air plenum and the facility requested the waiver granted by CMS to be approved until July 2022.	K 521		

Health Standards Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: J25009	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/22/2019
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NAME OF PROVIDER OR SUPPLIER PARK PLACE HEALTHCARE, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 535 COMMERCE STREET GRETNA, LA 70056
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S 089 SS=E	<p>9765 G Staff Orientation, Training and Education</p> <p>G. Dementia Training</p> <p>1. All employees shall be trained in the care of persons diagnosed with dementia and dementia-related practices that include or that are informed by evidence-based care practices.</p> <p>2. Nursing facility staff who provide care on a regular basis to residents in Alzheimer ' s special care units shall meet the following training requirements.</p> <p>a. Staff who provide nursing and nursing assistant care to residents shall be required to obtain at least eight hours of dementia-specific training within 90 days of employment and five hours of dementia-specific training annually. The training shall include the following topics:</p> <p>i. an overview of Alzheimer ' s disease and related dementias;</p> <p>ii. communicating with persons with dementia;</p> <p>iii. behavior management for persons with dementia;</p> <p>iv. promoting independence in activities of daily living for persons with dementia; and</p> <p>v. understanding and dealing with family issues for persons with dementia.</p> <p>b. Staff who have regular communicative contact with residents, but who do not provide nursing and nursing assistant care, shall be required to obtain at least four hours of dementia-specific training within 90 days of employment and one hour of dementia training annually. This training shall include the following topics:</p> <p>i. an overview of dementias; and</p> <p>ii. communicating with persons with dementia.</p> <p>c. Staff who have only incidental contact</p>	S 089		

DHH/Health Standards Section LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE 06/05/19
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Health Standards Section

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S 089	<p>Continued From page 1</p> <p>with residents shall receive general written information provided by the nursing facility on interacting with residents with dementia.</p> <p>3. Nursing facility staff who are not regularly assigned to the Alzheimer ' s special care unit shall meet the following training requirements:</p> <p>a. Staff who are not regularly assigned to the Alzheimer ' s special care unit, but still provide nursing assistant care in the facility shall be required to obtain four hours of dementia-specific training within 90 days of employment and two hours of dementia training annually.</p> <p>b. Unlicensed staff who are not regularly assigned to the Alzheimer ' s special care unit and who have regular communicative contact with residents but do not provide nursing assistant care in the facility shall be required to obtain four hours of dementia-specific training within 90 days of employment and one hour of dementia training annually. The training shall include the following topics:</p> <p>i. an overview of dementias; and</p> <p>ii. communicating with persons with dementia.</p> <p>c. Staff who have only incidental contact with residents shall receive general written information provided by the nursing facility on interacting with residents with dementia.</p> <p>4. Staff delivering approved training will be considered as having received that portion of the training that they have delivered.</p> <p>5. Any dementia-specific training received in a nursing or nursing assistant program approved by the Department of Health or the Department of Children and Family Services may</p>	S 089		

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S 089	<p>Continued From page 2</p> <p>be used to fulfill the training hours required pursuant to this Section.</p> <p>6. Nursing facility providers shall offer an approved complete training curriculum themselves or shall contract with another organization, entity, or individual to provide the training.</p> <p>7. The dementia-specific training curriculum shall be approved by the department. To obtain training curriculum approval, the organization, entity, or individual shall submit the following information to the department or its designee:</p> <ul style="list-style-type: none"> a. a copy of the curriculum; b. the name and qualifications of the training coordinator; c. a list of all instructors; d. the location of the training; and e. whether the training will be web-based. <p>8. A provider, organization, entity or individual shall submit any content changes to an approved training curriculum to the department, or its designee, for review and approval.</p> <p>9. If a provider, organization, entity or individual, with an approved curriculum, ceases to provide training, the department shall be notified in writing within 30 days of cessation of training. Prior to resuming the training program, the provider, organization, entity, or individual shall reapply to the department for approval to resume the program.</p> <p>10. Disqualification of Training Programs and Sanctions. The department may disqualify a training curriculum offered by a provider, organization, entity, or individual that has demonstrated substantial noncompliance with training requirements, including, but not limited to:</p> <ul style="list-style-type: none"> a. the qualifications of training 	S 089		

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S 089	<p>Continued From page 3</p> <p>coordinators; or b. training curriculum requirements.</p> <p>11. Compliance with Training Requirements. The review of compliance with training requirements shall include, at a minimum, a review of:</p> <p>a. the existence of an approved training curriculum; and b. the provider ' s adherence to established training requirements.</p> <p>12. The department may impose applicable sanctions for failure to adhere to the training requirements outlined in this Section.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure all licensed staff and non-licensed staff receive the required number of Dementia training hours, within 90 days of hire and annually. This deficient practice was identified for the facility and had the potential to affect any of the 21 residents diagnosed with Dementia, out of a total census of 75 Residents as evidenced by the Resident Census and Conditions of Residents Form (CMS-672). Findings:</p> <p>Review of the in-service training record provided by the facility revealed a Dementia in-service training dated 02/09/19. Further review revealed no hours documented on this training.</p> <p>Review of the 10 certificates of completion for 4 hours of Dementia Training (Staff Training) provided by the facility revealed 6 certificates</p>	S 089		

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S 089	<p>Continued From page 4</p> <p>were not dated.</p> <p>In an interview on 05/22/19 at 1:50pm S3RD indicated there were 115 employees. S3RD further indicated the facility had 45 new hires since June 2018. S3RD confirmed not all new hires had documentation of Dementia Training within 90 days of hire.</p> <p>The facility did not present any additional evidence that all staff received the required number of hours of Dementia Training within 90 days of hire.</p>	S 089		