STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	195389	A. Building B. Wing	12/09/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Heritage Manor of Baton Rouge II	9301 Oxford Place Ave Baton Rouge, LA 70809

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 0842 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interviews and record reviews, the facility failed to maintain accurate records in accordance with professional standards of practice by failing to ensure medication administration was accurately documented on the MAR for 3 of 3 (#1, #2, and #3) residents in the sample. This deficient practice had the potential to affect a current census of 119 residents. Findings: Resident #1Review of Resident #1's Clinical Record revealed he was admitted to the facility on [DATE] with diagnoses, which included, in part, Primary Generalized Osteoarthritis and was currently receiving treatment for multiple wounds. Further review revealed he was admitted to a local Hospice agency on 03/14/2024 and in a current Certification Period of 11/04/2025 through 01/02/2025. Review of Resident #1's Physician Orders, dated 09/01/2025 through 12/09/2025, revealed, in part, an order written on 08/21/2025 for Oxycodone/Acetaminophen Tab 10-325mg. Give 1 tablet by mouth every 6 hours as needed for pain related to Primary Generalized Osteoarthritis.Review of Resident #1's Narcotic Log Sheet for Oxycodone/Acetaminophen Tab 10-325mg, dated 09/23/2025 through 10/31/2025, revealed, in part, the following:09/24/2025 at 10:21 a.m. - 1 tablet administered;09/24/2025 at 8:00 p.m. - 1 tablet administered; 10/05/2025 at 9:15 a.m. - 1 tablet administered; and 10/09/2025 at 2:30 a.m. - 1 tablet administered.Review of Resident #1's September 2025 MAR for Oxycodone/Acetaminophen Oral Tablet 10-325mg, dated 09/01/2025 through 09/30/2025, revealed, in part, the following: 09/24/2025 at 10:21 a.m. - No administration documented; and 09/24/2025 at 8:00 p.m. - No administration documented.Review of Resident #1's October 2025 MAR for Oxycodone/Acetaminophen Oral Tablet 10-325mg, dated 10/01/2025 through 10/31/2025, revealed, in part, the following: 10/05/2025 at 9:15 a.m. - No administration documented; and 10/09/2025 at 2:30 a.m. - No administration documented. Resident #2Review of Resident #2's Clinical Record revealed she was admitted to the facility on [DATE] with diagnoses, which included, in part, a Stage 2 Pressure Ulcer to the Sacrum and Chronic Pain. Further review revealed she was admitted to a local Hospice agency on 08/20/2025 and in a current Certification Period of 08/20/2025 through 11/17/2025.Review of Resident #2's Physician Orders, dated 08/20/2025 through 09/11/2025, revealed, in part, an order written on 08/20/2025 for Morphine Sulfate Concentrate Oral Solution 100mg/5mL. Give 1 ml by mouth every 1 hour as needed for Pain/Shortness of Breath.Review of Resident #2's Narcotic Log Sheet for Morphine Sulfate Concentrate Oral Solution 100mg/5mL, dated 09/10/2025 through 09/11/2025, revealed, in part, the following: 09/10/2025 at 5:55 a.m. - 1mL administered.Review of Resident #2's September 2025 MAR for Morphine Sulfate Concentrate Oral Solution 100mg/5mL, dated 09/01/2025 through 09/30/2025, revealed, in part, the following: 09/10/2025 at 5:55 a.m. - No administration documented. Resident #3Review of Resident #3's Clinical Record revealed he was admitted to the facility on [DATE] with diagnoses, which included, in part, Spinal Stenosis and a Stage 2 Pressure Ulcer to the Sacrum. Further review revealed he was admitted to a local Hospice agency on 08/14/2025 and in a current Certification Period of 11/12/2025 through 02/09/2025. Review (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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195389	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/09/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Heritage Manor of Baton Rouge II	9301 Oxford Place Ave Baton Rouge, LA 70809

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 0842 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	of Resident #3's Physician Orders, dated 08/14/2025 through 12/09/2025, revealed, in part, the following:08/14/2025 - Oxycodone/Acetaminophen Oral Tablet 10-325mg. Give 1 tablet by mouth every 4 hours as needed for Pain. Discontinued on 09/26/2025; 09/27/2025 - Oxycodone/Acetaminophen Oral Tablet 10-325mg. Give 1 tablet by mouth three times a day for Pain. Discontinued on 11/10/2025; and 11/10/2025 - Oxycodone-Acetaminophen Oral Tablet 10-325mg - Give 1 tablet by mouth every 6 hours as needed for Pain related to Spinal Stenosis, Lumbar Region Without Neurogenic Claudication and Give 1 tablet by mouth four times a day for Pain.Review of Resident #3's Narcotic Log Sheet for Oxycodone/Acetaminophen Tab 10-325mg, dated 08/29/2025 through 09/14/2025, revealed, in part, the following:09/01/2025 at 8:00 a.m. - 1 tablet administered; 09/02/2025 at 9:00 p.m. - 1 tablet administered;09/03/2025 at 9:00 a.m. - 1 tablet administered;09/06/2025 at 5:45 a.m. - 1 tablet administered;09/06/2025 at 10:30 a.m. - 1 tablet administered;09/07/2025 at 5:00 a.m. - 1 tablet administered;09/10/2025 at 4:30 a.m. - 1 tablet administered;09/10/2025 at 1:55 p.m. - 1 tablet administered;09/11/2025 at 9:30 a.m. - 1 tablet administered; and 09/12/2025 at 9:35 a.m. - 1 tablet administered. Review of Resident #3's September 2025 MAR for Oxycodone/Acetaminophen Oral Tablet 10-325mg, dated 09/01/2025 through 09/30/2025, revealed, in part, the following: 09/01/2025 at 8:00 a.m. - No administration documented; 09/02/2025 at 9:00 p.m. - No administration documented;09/03/2025 at 9:00 a.m. - No administration documented;09/06/2025 at 5:45 a.m. - No administration documented;09/06/2025 at 10:30 a.m. - No administration documented;09/07/2025 at 5:00 a.m. - No administration documented;09/10/2025 at 4:30 a.m. - No administration documented;09/10/2025 at 1:55 p.m. - No administration documented;09/11/2025 at 9:30 a.m. - No administration documented; and 09/12/2025 at 9:35 a.m. - No administration documented.An interview was conducted on 12/09/2025 at 3:15 p.m. with S2LPN. S2LPN confirmed she worked at the facility as a floor nurse and was familiar with the facility's procedures for administration of narcotics. S2LPN confirmed when administering a narcotic, the nurse should count the remaining tablets to ensure the Narcotic Log remained accurate, then document they have pulled the medication for administration with the date/time they pulled it to administer. S2LPN stated the nurse should then administer the medication to the resident. S2LPN stated after the medication was administered, the nurse should then document the administration in the MAR. S2LPN confirmed a resident's Narcotic Log should match their MAR. An interview was conducted on 12/09/2025 at 3:30 p.m., with S1DON. S1DON confirmed when administering a narcotic, she expected the nurse to count the remaining tablets to ensure the Narcotic Log remained accurate, then document they have pulled the medication for administration with the date/time they pulled it to administer. S1DON confirmed the nurse should then administer the medication to the resident and after the medication was administered, the nurse should document the administration in the MAR. S1DON confirmed if a medication was logged in the resident's Narcotic Log as pulled for administration, she expected the resident's MAR to accurately reflect the administration of the pulled medication. S1DON confirmed a resident's Narcotic Log should match their MAR and Resident #1, #2, and #3's did not.