Division of Public and Behavioral Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	10031	A. BUILDING _____ B. WING _____	11/13/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TRANQUILLIUM-HALEH SENIOR CARE	**3460 W HALEH AVE, LAS VEGAS, NEVADA ,89141**

(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
0000	Initial Comments Inspector Comments: This Statement of Deficiencies was generated as a result of a COVID-19 focused infection control State Licensure survey conducted at your facility on 11/13/20, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for nine Residential Facility for Group beds for elderly and disabled persons and/or persons with Alzheimer's disease, Category II residents. The census at the time of the survey was one. The facility had no residents or staff positive with COVID-19. The COVID-19 focused infection control survey included the following: Observations: - Signage was posted at the facility entrance prohibiting entry if individuals have experienced symptoms related to COVID-19, required visitors to wear a mask, and to wash or sanitize hands upon entry. - Facility staff checked the temperature of the health facility inspector upon entry. - Health facility inspector was asked COVID-19 screening questions related to symptoms, travel history, and exposure to the virus at other facilities prior to entry to the facility. - Health facility inspector was asked to sanitize their hands prior to entry. - Hand sanitizer was located next to the front door, and the office. - All staff wore cloth and/or disposable masks. - The caregiver washed their hands after resident contact. - The caregiver washed hands and utilized alcohol-based hand sanitizers between tasks. - The resident was in the living room. No other residents resided at the facility. - Staff cleaned high touch areas with Sol-U-Guard Disinfectant solution. - The facility had two 32-ounce bottles of hand sanitizer, one 12-ounce bottle of hand sanitizer, one 8-ounce bottle of hand sanitizer, 20 face shields, three N95 masks, 100 shoe coverings, 100 disposable masks, 10 gowns, and 350 gloves. - One non-contact and one ear thermometer were available. Interview with the owner and one caregiver revealed: - Visitors were limited to essential healthcare workers. - Temperature checks are completed for staff and essential visitors	0000		

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	upon entrance to the facility. - All visitors and staff are asked COVID-19 screening questions related to symptoms, travel history, and exposure to the virus at other facilities prior to entry to the facility. - Visitors are required to utilize hand sanitizer or wash hands upon entry. - The residents' temperatures are checked twice a day. - Staff sanitized high touch areas throughout the day with Sol-U-Guard Disinfectant solution. - Training was held regarding proper donning and doffing of personal protective equipment (PPE). - The facility had a plan in place for isolation and quarantining residents. - The facility had three N95 masks and an appointment for fit testing is scheduled for 11/19/20. Record Review: - Infection Control Program policies and procedures documented measures to ensure isolation and prevention of COVID-19. - Standard and transmission-based precautions for COVID-19. - Visitor entry and facility screening practices including screening questions, hand sanitization and temperature checks. - Education, monitoring and screening practices of staff including proper PPE use, temperature checks, hand washing and sanitization. - Facility policies and procedures to address staffing issues during emergencies, such as the transmission of COVID-19. The findings and conclusions of any investigation by the Division of Public and Behavioral Health shall not be construed as prohibiting any criminal or civil investigation, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. There were no regulatory deficiencies identified. No further action necessary. Please retain a copy for your records.			