STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	10639	A. BUILDING _____ B. WING _____	07/01/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SAINT ANNE'S GROUP HOME	1625 PEAVINE RD, RENO, NEVADA ,89503

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0000	Initial Comments Inspector Comments: This Statement of Deficiencies was generated as a result of a State Licensure annual grading survey conducted at your facility on 07/01/2024. This State Licensure survey was conducted by the Division of Public and Behavioral Health in accordance with NAC 449, Residential Facility for Groups. The facility was licensed for seven Residential Facility for Group beds for elderly and disabled persons, two Category I and five Category II residents. The census at the time of the survey was four. Four resident files were reviewed, and five employee files were reviewed. The facility received a grade of A. 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. The following regulatory deficiencies were identified:	0000		
0074 SS= D	Elder Abuse Training - NRS 449.093 Training to recognize and prevent abuse of older persons: Persons required to receive; frequency; topics; costs; actions for failure to complete. 1. An applicant for a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before a license to operate such a facility, agency or home is issued to the applicant. If an applicant has completed such training within the year preceding the date of the application for a license and the application includes evidence of the training, the applicant shall be deemed to have complied with the requirements of this subsection. 2. A licensee who holds a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must annually	0074	1.) The employee in question is a part time employee. Our facility will make sure that even part time employee will need to do a new elder abuse training every time to avoid confusion on the dates. 2.) All part time employees will need to do a new elder abuse training every time they will work even if they still have a current one. 3.) Upon rehire, a new elder abuse training will be required. 4.) Leya Irugin (manager) and Alan Barcelon (administrator) will ensure the plan of correction is implemented. 5.) 7/1/2024 6.) We have no supporting documents to attach. Our deficiency and plan of correction is based on making sure that training is done in a timely manner.	07/01/2024

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	receive training to recognize and prevent the abuse of older persons before the license to operate such a facility, agency or home may be renewed. 3. If an applicant or licensee who is required by this section to obtain training is not a natural person, the person in charge of the facility, agency or home must receive the training required by this section. 4. An administrator or other person in charge of a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before the facility, agency or home provides care to a person and annually thereafter. 5. An employee who will provide care to a person in a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before the employee provides care to a person in the facility, agency or home and annually thereafter. 6. The topics of instruction that must be included in the training required by this section must include, without limitation: (a) Recognizing the abuse of older persons, including sexual abuse and violations of NRS 200.5091 to 200.50995, inclusive; (b) Responding to reports of the alleged abuse of older persons, including sexual abuse and violations of NRS 200.5091 to 200.50995, inclusive; and (c) Instruction concerning the federal, state and local laws, and any changes to those laws, relating to: (1) The abuse of older persons; and (2) Facilities for intermediate care, facilities for skilled nursing, agencies to provide personal care services in the home, facilities for the care of adults during the day, residential facilities for groups or homes for individual residential care, as applicable for the person receiving the training. 7. The facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of			

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	adults during the day, residential facility for groups or home for individual residential care is responsible for the costs related to the training required by this section. 8. The administrator of a facility for intermediate care, facility for skilled nursing or residential facility for groups who is licensed pursuant to chapter 654 of NRS shall ensure that each employee of the facility who provides care to residents has obtained the training required by this section. If an administrator or employee of a facility or home does not obtain the training required by this section, the Division shall notify the Board of Examiners for Long-Term Care Administrators that the administrator is in violation of this section. 9. The holder of a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care shall ensure that each person who is required to comply with the requirements for training pursuant to this section complies with such requirements. The Division may, for any violation of this section, take disciplinary action against a facility, agency or home pursuant to NRS 449.160 and 449.163. Inspector Comments: Based on record review and interview, the facility failed to ensure an employee completed timely annual elder abuse prevention training for 1 of 5 employees (Employee #5). Findings include: Employee #5 Employee #5 was hired as a Caregiver on 05/16/2023. The employee's personnel file documented an initial elder abuse training completed on 09/12/2022, and an annual elder abuse training completed on 09/21/2023. The annual elder abuse training was completed nine days late. On 07/01/2024 at 12:38 PM, Manager confirmed Employee #5 's annual elder abuse training, completed on 09/21/2023, was completed late. Severity: 2 Scope: 1			

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0179 SS= D	Health & Sanitation - Screens - NAC 449.209 Health and sanitation. (NRS 449.0302) 6. All windows that are capable of being opened in the facility and all doors that are left open to provide ventilation for the facility must be screened to prevent the entry of insects. Inspector Comments: Based on observation and interview, the facility failed to ensure all windows capable of being opened in the facility to provide ventilation for the facility were screened to prevent the entry of insects. Findings include: On 07/01/2024 at 9:56 AM, two windows outside bedroom five lacked a screen. On 07/01/2024 at 10:06 AM, the Manager confirmed two windows for bedroom five lacked screens. The Manager explained the screens had been removed a few months prior. Severity: 2 Scope: 1	0179	1.) The screens for the windows were put back that same day. 2.) The facility will check the windows/screens all around to make sure they are in working order. 3.) When windows are cleaned, the facility will ensure to check that all screens are replaced and not left on the ground. 4.) Leya Irugin (manager) and Alan Barcelon (administrator) will be responsible that plan of correction is implemented. 5.) 7/1/2024 6.) Pictures of the screens replaced on the windows are attached on the documents.	07/01/2024

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1830 SS= F	Infection Control Required Training - Infection Control Required Training LCB File No. R048-22 Sec. 5 4. The persons designated pursuant to subsection 3 as responsible for infection control shall complete not less than 15 hours of training concerning the control and prevention of infections provided by the Association for Professionals in Infection Control and Epidemiology, Inc., the Centers for Disease Control and Prevention of the United States Department of Health and Human Services, the World Health Organization or the Society for Healthcare Epidemiology of America, or a successor in interest to any of those organizations, not later than 3 months after being designated and annually thereafter. 5. Training completed pursuant to subsection 4 may be in any format, including, without limitation, an online course provided for compensation or free of charge. A certificate of completion for the training must be maintained in the personnel file of each person designated pursuant to subsection 3 for 3 years immediately following the completion of the training. Inspector Comments: Based on personnel file review and interview, the primary and secondary infection control staff failed to complete the required 15 hours of infection control training timely (Employee #1 and #2). Findings include: Employee #1 Employee #1 was hired by the facility as the Administrator with a start date of 05/01/2023. Employee #1's personnel file documented 15 hours of infection control training completed on 01/10/2024. Employee #2 Employee #2 was hired by the facility as a Manager with a start date of 10/01/2021. Employee #2's personnel file documented 15 hours of infection control training completed on 05/15/2024. On 07/01/2024 at 10:34 AM, the Manager verbalized the Administrator and the Manager were the primary and secondary infection control staff. The Manager confirmed the initial infection control training was completed late. Severity: 2 Scope: 3	1830	1.) Our facility will make sure that training is done in a timely manner. 2.) Since this was a fairly new regulation, I thought I did the training in a timely manner. However, I was told that it was late. This information helps me to be able to do the training in a timely manner from now on. I always have training reminders set on my calendar. 3.) Through calendar reminders, it will ensure that the training will be done in a timely manner. 4.) Alan Barcelon (administrator and infection control preventionist) is responsible. 5.) 7/1/2024 6.) No attachments for this deficiency/plan of correction.	07/01/2024