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
	11459	A. BUILDING _____ B. WING _____	04/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OHANA SENIOR LIVING CARE I	6825 WHITE SANDS AVE, LAS VEGAS, NEVADA ,89145

(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 an annual State Licensure survey conducted at your facility on 04/23/24, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for 8 Residential Facility for Group beds for elderly and disabled persons, and/or persons with Alzheimer's disease, and/or persons with mental illnesses, Category II residents. The census at the time of the survey was zero. Zero resident files and zero employee files were reviewed. The facility received a grade of D. 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 deficiencies were identified:	0000		
0178 SS= F	Health & Sanitation - Maintain Int/ext - NAC 449.209 Health and sanitation. (NRS 449.0302) 5. The administrator of a residential facility shall ensure that the premises are clean and that the interior, exterior and landscaping of the facility are well maintained. Inspector Comments: Based on observation and interview, the facility failed to ensure the exterior of the facility was well maintained. Findings include: On 04/23/24 in the morning, the front yard perimeter around the rocks had noticable weeds. The back yard and back patio area was overgrown with weeds throughout. On 04/23/24 in the morning, the Caretaker acknowledged the exterior of the facility needed cleaning. Severity: 2 Scope: 3	0178	Tag 0178 HEALTH & SANITATION 1.The facility administrator or designee will monitor environment/premise is clean, free of debris, and yard/landscape is maintained regularly. 1a. Facility yard and surroundings has been cleaned per pictures attached as of May 2, 2024 2. Administrator/designee will be responsible to ensure that the premises are clean and well maintained on a regular basis 3. By May May 20,2024	05/02/2024

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Name: HERMAN ESGUERRA Title: Administrator Date: 05/07/2024

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0251 SS= F	Storage of Food-Perishable Foods Refrigerated - NAC 449.217 Kitchens; storage of food; adequate supplies of food; permits; inspections. (NRS 449.0302) 2. Perishable foods must be refrigerated at a temperature of 40 degrees Fahrenheit or less. Frozen foods must be kept at a temperature of 0 degrees Fahrenheit or less. Inspector Comments: Based on observation and interview, the facility failed to ensure perishable foods were refrigerated at a temperature of 40 degrees Fahrenheit or less. Findings include: On 04/23/24 in the morning, the refrigerator in the kitchen had two thermometers on the door that read 46 degrees Fahrenheit. On 04/23/24 in the morning, the Caretaker confirmed the refrigerator temperature was not at or below 40 degrees Fahrenheit. Severity: 2 Scope: 3	0251	TAG 0251 Storage of Food-Perishable Foods Refrigerated. The facility will have adequate food supplies and are stored in the clean refrigerator set to 40F degrees and freezer to zero F. 1a.Staff has cleared out expired food, set the refrigerator at 40Fahrenheit and freezer at Zero Fahrenheit 2.The administrator will develop a checklist for daily monitoring per checklist attached and staff will be trained per policy and procedure attached 3. By May 20,2024	05/02/2024

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0276 SS= F	Service of Food-Nutritious Meals;Frequency - NAC 449.2175 Service of food 7. Meals must be nutritious, served in an appropriate manner, suitable for the residents and prepared with regard for individual preferences and religious requirements. At least three meals a day must be served at regular intervals. The times at which meals will be served must be posted. Not more than 14 hours may elapse between the meal in the evening and breakfast the next day. Snacks must be made available between meals for the residents who are not prohibited by their physicians from eating between meals. Inspector Comments: Based on observation and interview, the facility failed to ensure food was not expired and was suitable for residents. Findings include: On 04/23/24 in the morning, the following was observed: Inside a refrigerator in a room located off of the living room, there was a package of meatballs that appeared discolored and dried out in the freezer. The refrigerator had a half dozen cooked foods in storage dishes and containers with no labels on them and boxes of beef and chicken broth with 2023 expiration dates on the cartons. On 04/23/24 in the morning, a Caretaker acknowledged the expired food and indicated the food had been there since the residents left the facility. Severity: 2 Scope: 3	0276	TAG0276 Service of Food-Nutritious Meals. 1. Staff will have unexpired food in the facility and will ensure food containers are labels and dated. 1a Staff has cleared the refrigerator and will have enough fresh supplies stored at appropriate temperature. 2. The administrator / designee will be responsible for train staff according to the food handling and storage policy and procedures and designee will monitor for compliance regularly. 3. By May 20, 2024	05/02/2024

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0920 SS= F	Medication: Storage - NAC 449.2748 Medication: Storage; duties upon discharge, transfer and return of resident. (NRS 449.0302) 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medications for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself or herself without supervision may keep the resident ' s medication in his or her room if the medication is kept in a locked container for which the facility has been provided a key. 2. Medication stored in a refrigerator, including, without limitation, any over-the-counter medication, must be kept in a locked box unless the refrigerator is locked or is located in a locked room. Inspector Comments: Based on observation and interview, the facility failed to ensure medications were secured. Findings include: On 04/23/24 in the morning, medications were observed in the facility, unsecured: -In an open room off of the main living room, a bottle of Tylenol Extra Strength was observed in a drawer in a clear plastic file cabinet. -Attached to the refrigerator in the kitchen, was a plastic bag with two medication bottles and some loose pills in the bag. The Caretaker reported the medication belonged to them. -In one of the bathrooms there were miscellaneous toiletries on a multiple shelve next to the door. On 04/23/24 in the morning, the Caretaker confirmed the observation of the unsecured medications. Severity: 2 Scope: 3	0920	Tag 0920 Medication Storage 1. Facility staff will have prescriptions and non-prescription medications are always securely locked 1a. Staff has corrected and storage of medications has lock installed per attached. 2. Administrator/designee will train staff on policy and procedure of proper storage of medications and will be monitored for compliance per checklist attached. 3.By May 20 ,2024	05/02/2024

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0930 SS= F	Maintenance and Contents of Separate File - NAC 449.2749 Maintenance and contents of separate file for each resident; confidentiality of information. (NRS 449.0302) 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he or she permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including, without limitation: (a) The full name, address, date of birth and social security number of the resident. (b) The address and telephone number of the resident ' s physician and the next of kin or guardian of the resident or any other person responsible for the resident. (c) A statement of the resident ' s allergies, if any, and any special diet or medication he or she requires. Inspector Comments: Based on observation and interview, the facility failed to ensure resident records were secure. Findings include: On 04/23/24 in the morning, the file cabinet housing the resident records was unlocked. The file cabinet was in the laundry room, and the lock was open. Two Caretakers and another family member had access to the records. On 04/23/24 in the morning, a Caretaker acknowledged the observation and verbalized the understanding the cabinet should have been locked. Severity: 2 Scope: 3	0930	Tag 0930 Maintenance and Contents of resident files 1. Facility will have a locked, fire-resistant cabinet to keep resident's individual file/chart for safety and privacy at all times. 1a.Staff has a secured filing cabinets per attached. 2. Administrator or designee will ensure staff will be trained on keeping of residents file and contents are safely secured per policy and procedure. 3. By May 20, 2024	05/02/2024

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0994 SS= F	Alzheimer 's Care Standards for Safety - NAC 449.2756 and R043-22 Residential facility which provides care to persons with Alzheimer ' s disease: Standards for safety; personnel required; training for employees. (NRS 449.0302) 1. The administrator of a residential facility which provides care to persons with Alzheimer ' s disease or other forms of dementia who meet the criteria prescribed in paragraph (a) of subsection 2 of NRS 449.1845 shall ensure that: (e) Knives, matches, firearms, tools and other items that could constitute a danger to the residents of the facility are inaccessible to the residents. Inspector Comments: Based on observation and interview, the facility failed to ensure items that could pose a danger to residents were inaccessible. Findings include: On 04/23/24 in the morning, the following was observed: -The kitchen drawer containing knives was unlocked. -Kitchen knives were in the dish drainer next to the sink. -There were scissors, staples and a full box of thumb tacks located in a plastic file cabinet in an unlocked room off of the living room. -There was a large nail clipper on the dresser in unlocked room occupied by a Caretaker family member. On 04/23/24 in the morning, two Caretakers confirmed the observations. Severity: 2 Scope: 3	0994	Tag 0994 Alzheimer's Standard Care for Safety 1. The facility will ensure staff is trained how to safely care Alzheimer's clients to prevent injury per policy and procedure 1a. Staff has provided locks for sharp objects, toxic substances, tools and kept locked at all times per attached. 2. The administrator /designee is responsible for compliance. 3. By May 10.2024	05/02/2024

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0999 SS= F	Alzheimer 's Care Standards for Safety - NAC 449.2756 and R043-22 Residential facility which provides care to persons with Alzheimer ' s disease: Standards for safety; personnel required; training for employees. (NRS 449.0302) 1. The administrator of a residential facility which provides care to persons with Alzheimer ' s disease or other forms of dementia who meet the criteria prescribed in paragraph (a) of subsection 2 of NRS 449.1845 shall ensure that: (g) All toxic substances are not accessible to the residents of the facility. Inspector Comments: Based on observation and interview, the facility failed to ensure toxic substances were secure. Findings include: On 04/23/24 in the morning, soap, toothpaste, lotion, deodorant and other toiletries were in two bathrooms and on the dresser in an unlocked room occupied by a Caretaker family member. On 04/23/24 in the morning, an open bag of charcoal briquettes was on a shelf in the backyard. On 04/23/24 in the morning, two Caretakers acknowledged these substances should have been secure. Severity: 2 Scope: 3	0999	Tag 0999 Alzheimer's Care Standards for Safety. 1. The staff will have a designated area in the facility to lock cleaning materials, toxic substances. personal toiletries, and medications , cooking elements etc. after each uses to avoid accidental ingestion 1a. Staff has provided storage with locks for toxic substances like cleaning products per attached pictures and policy and procedures 2. The facility administrator/designee will monitor to ensure cabinets are locked at all times per attached 3. May 20, 2024.	05/02/2024