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 _____	06/06/2024

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 the mandatory re-grading survey completed in your facility on 06/06/24, in accordance with Nevada Administrative Code, Chapter 449, Residential Facility for Groups. The facility is licensed for eight 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 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 investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. The following regulatory deficiency was 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.	0178	TAG0178 HEALTH & SANITATION 1. The facility administrator or designee shall ensure the interior and exterior of the premises are clean and the landscaping is well maintained regularly 1a Facility's premises, interior and exteriorand landscaping were cleaned and free of weeds on May 20, 2024 and will be maintained regularly. 2. Administrator and or designee will be responsible . 3. By June 20.2024	05/20/2024

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: HERMANDO ESGUERRA	Title: ADMINISTRATOR	Date: 06/19/2024

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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.	0251	TAG 0251 Storage of Food-Perishable Foods 1. Staff will ensure that perishable foods are dated and stored in the refrigerator at a temperature of 40 degrees and frozen foods are kept at a temperature of zero 0 degrees. 1a. Staff has cleared the refrigerator and perishable foods are dated and kept at a temperature of 40 degrees. Frozen foods are kept at temperature of 0 degrees on May 20.2024. 2. Administrator and or designee will monitor daily for compliance per attached facility checklist. 3. By June 20.2024	05/20/2024
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.	0276	TAG 0276 Service of Food-Nutritious Meals Frequency 1. The facility will serve three nutritious meals and snacks in appropriate manner according to doctor's order, suitable for the residents and according to their preferrence. 1a.Mealtimes will be posted in the dining room , Breakfast at 7am , Lunch 1130, Dinner 5pm ,Snacks in between meals. 2. Administrator and or designee will be responsible 3. By June 20,2024	06/20/2024

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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.	0920	TAG 0920 Medication Storage 1.Facility will have a secured and locked storage for prescription and non-prescription medications in a client's room if appropriate, in the refrigerator and in the staff room . 2.Administrator or designee will be responsible in monitoring proper medication storage per facility checklist attached 3.By June 20, 2024	05/20/2024
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.	0930	Tag 0930 Maintenance and Contents of resident files 1. Facility will have a separate file for each resident containing confidential information and stored in a locked, fire-resistant cabinet for safety and privacy at all times. 1a.Staff has a secured filing cabinets as of May 20,2024 1b Resident file to include medical records, admission face sheet and physical exam and admission assessments and physician's orders 2.Administrator or designee will ensurestaff is trained on keeping residents file and contents safe and secured for 5 years. 3. By June 20, 2024	06/20/2024

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0991 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: (b) Operational alarms, buzzers, horns or other technology for notifying staff when a door is opened are installed on all doors that may be used to exit the facility. Inspector Comments: Based on observation and interview, the facility failed to ensure two exit doors sounded an audible alarm upon opening. Findings include: On 06/06/24 at 8:45 AM, the alarm on the front door of the facility was not activated. On 06/06/24 at 8:50 AM, the alarm on the door in the laundry room leading to the backyard, was not functioning. On 06/06/24 at 8:50 AM, the House Manager acknowledged the front door alarm should have been activated and audible at all times, and confirmed the alarm in the laundry room was not functioning. Severity: 2 Scope: 3	0991	TAG 0991 Alzheimer's Care Standards for Safety 1. Facility will ensure two exit doors sound an audible alarm upon opening the front door of the facility and the alarm on the door in the laundry room leading to the backyard is activated and functioning. 1a. Staff tested the functionality of the exit doors after battery was changed on day of the survey to ensure compliance 1b Facility Checklist attached 2. Administrator and designee will schedule battery change and monitor the alarm daily. By June 20, 2024.	06/06/2024
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.	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 accidents and injuries. 1a. Staff has provided magnetic locks for sharp objects, matches , medical equipments and tools for safety corrected on May 20, 2024. 1b Caregiver's Alzheimer's training certificate attached 1c Facility safety checklist attached 2.The administrator /designee is responsible for compliance. 3. By June 20, 2024	05/20/2024

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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.	0999	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 accidental ingestion and injury 1a. Staff has provided locked cabinets to secure toiletries, toxic substances , laundry detergents, chemicals, for safety corrected on May 20, 2024. 2.The administrator /designee is responsible for compliance per facility checklist attached 3. To be monitored by June 20, 2024	05/20/2024