DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING _____ B. WING _____	**02/17/2022**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FIVE STAR PREMIER RESIDENCES OF RENO	**3201 PLUMAS STREET, RENO, NEVADA ,89509**

(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 grading re-survey State Licensure Survey and complaint investigation conducted at your facility on 02/17/22, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for 41 Residential Facility for Group beds for elderly and disabled persons with assisted living services, Category II residents. The census at the time of the survey was 34. Six resident files were reviewed and six employee personnel files were reviewed. The facility received a grade of A. There was one complaint investigated. Complaint #NV00065742 with the following allegations could not be substantiated due to lack of evidence. Allegation #1, call lights were not answered promptly. Allegation #2, residents were left for long periods of time in soiled garments. Allegation #3, resident's oxygen needs were not being met. Allegation #4, the dining room was closed due to lack of staff. Allegation #5, residents were left alone in their rooms for long periods of time. The investigation into the allegations included: Observation of five residents with oxygen, residents in common areas of the facility, and residents participating in a scheduled activity. Interviews were conducted with six residents including one of the residents of concern, a resident of concern's family member, and the Health and Wellness Director. Review of the Individual Service Plans for the residents of concern, the February 2022 Activity Calendar, and the staffing schedule. Review of the facility policies for Answering Call Lights, Oxygen Safey: General Guidelines, Oxygen Utilization and Storage, Resident Service Plans, and Lifestyle 360 Program Overview. The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigation, actions or other claims for	0000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Name: PATRICK WARD Title: Administrator Date: 03/04/2022

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.

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	relief that may be available to any party under applicable federal, state, or local laws. The following deficiencies were identified:			
0072 SS= D	Qualifications of Caregiver - Med Training - NAC 449.196 Qualifications and training of caregivers. (NRS 449.0302) 3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must: (a) Before assisting a resident in the administration of a medication, receive the training required pursuant to paragraph (e) of subsection 6 of NRS 449.0302, which must include at least 16 hours of training in the management of medication consisting of not less than 12 hours of classroom training and not less than 4 hours of practical training, and obtain a certificate acknowledging the completion of such training; (b) Receive annually at least 8 hours of training in the management of medication and provide the residential facility with satisfactory evidence of the content of the training and his or her attendance at the training; (c) Complete the training program developed by the administrator of the residential facility pursuant to paragraph (e) of subsection 1 of NAC 449.2742; and (d) Annually pass an examination relating to the management of medication approved by the Bureau.	0072	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022

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0102 SS= D	Personnel File - TB Screening - NAC 449.200 Personnel files. 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee; Inspector Comments: Based on employee file review, document review and interview, the facility failed to ensure a tuberculosis (TB) screening was completed within the required timeframe for 1 of 6 sampled employees (Employee #1). Findings include: Employee #1 Employee #1 was hired as a Resident Assistant/Medication Technician with a start date of 01/28/20. Employee #1's employee file documented a TB test given on 01/22/21 and read negative on 01/25/21. Employee #1's employee file lacked documented evidence of a TB test for 2022. On 02/17/22 at 11:07 AM, the Administrator confirmed the TB findings for Employee #1 and verbalized the lack of completing the TB employee screening posed a risk to residents. Severity: 2 Scope: 1	0102	1) How facility will identify - we use a tickler file and report is ran monthly and sent out to managers of each department of what trainings or annual test that need to be completed and by when for each employee. 2) What measures will be put in place - We will use our tickler file to monitor 3) How facility will monitor - Business office manager / HR coordinator will manage tickler file and any employee not in compliancy will be removed from schedule until compliant and paperwork received by BOM. 4) date of completion was 2/24/22	02/24/2022

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0106 SS= D	Personnel File - 1st Aid & CPR - NAC 449.200 Personnel files 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1: (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation; Inspector Comments: Based on employee personnel file review, document review and interview, the facility failed to ensure 1 of 6 sampled employees (Employee #1) completed annual cardiopulmonary resuscitation (CPR) and first aid training. Findings include: Employee #1 Employee #1 was hired as a Resident Assistant/Medication Technician with a start date of 01/28/20. Employee #1's employee file documented CPR and first aid certification dated 01/30/20 to 01/31/22. Employee #1's personnel file lacked documented evidence of current CPR and first aid certification. On 02/17/22 at 11:07 AM, the Administrator confirmed Employee #1's CPR and first aid training was not renewed for 2022 and verbalized the employee had been regularly scheduled to work with residents. Severity: 2 Scope: 1	0106	1) How facility will identify - we use a tickler file and report is ran monthly and sent out to managers of each department of what trainings or annual test that need to be completed and by when for each employee. 2) What measures will be put in place - We will use our tickler file to monitor 3) How facility will monitor - Business office manager / HR coordinator will manage tickler file and any employee not in compliancy will be removed from schedule until compliant and paperwork received by BOM. 4) date of completion was 2/24/22	02/24/2022

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0172 SS= D	Health And Sanitation-Garbage - NAC 449.209 Health and sanitation. (NRS 449.0302) 2. Containers used to store garbage outside of the facility must be kept reasonably clean and must be covered in such a manner that rodents are unable to get inside the containers. At least once each week, the containers must be emptied and the contents of the containers must be removed from the premises of the facility. 3. Containers used to store garbage in the kitchen and laundry room of the facility must be covered with a lid unless the containers are kept in an enclosed cupboard that is clean and prevents infestation by rodents or insects. Containers used to store garbage in bedrooms and bathrooms are not required to be covered unless they are used for food, bodily waste or medical waste.	0172	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022
0178 SS= D	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	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022
0255 SS= F	Permits-Comply with NAC 446 on Food Service - NAC 449.217 Kitchens; storage of food; adequate supplies of food; permits; inspections. (NRS 449.0302) 6. A residential facility with more than 10 residents shall: (a) Comply with the standards prescribed in chapter 446 of NAC; and (b) Obtain the necessary permits from the Division.	0255	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022
0593 SS= F	Rights of Residents; Procedure for Filing - NAC 449.268 Rights of residents; procedure for filing grievance, complaint or report of incident; investigation and response. (NRS 449.0302) 1. The administrator of a residential facility shall ensure that: (d) The facility is a safe and comfortable environment;	0593	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022

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0690 SS= D	Residents Requiring Use of Oxygen - NAC 449.2712 Residents requiring use of oxygen. (NRS 449.0302) 1. A person who requires the use of oxygen must not be admitted to a residential facility or be permitted to remain as a resident of a residential facility unless he or she: (a) Is mentally and physically capable of operating the equipment that provides the oxygen; or (b) Is capable of: (1) Determining his or her need for oxygen; and (2) Administering the oxygen to himself or herself with assistance. 2. The caregivers employed by a residential facility with a resident who requires the use of oxygen shall: (a) Monitor the ability of the resident to operate the equipment in accordance with the orders of a physician; and (b) Ensure that: (1) The resident ' s physician evaluates periodically the condition of the resident which necessitates his or her use of oxygen; (2) Signs which prohibit smoking and notify persons that oxygen is in use are posted in areas of the facility in which oxygen is in use or is being stored; (3) Persons do not smoke in those areas where smoking is prohibited; (4) All electrical equipment is inspected for defects which may cause sparks; (5) All oxygen tanks kept in the facility are secured in a stand or to a wall; (6) The equipment used to administer oxygen is in good working condition; (7) A portable unit for the administration of oxygen in the event of a power outage is present in the facility at all times when a resident who requires oxygen is present in the facility; and (8) The equipment used to administer oxygen is removed from the facility when it is no longer needed by the resident.	0690	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022

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0859 SS= D	Medical Care of Resident After Illness - NAC 449.274 Medical care of resident after illness, injury or accident; periodic physical examination of resident; rejection of medical care by resident; written records. (NRS 449.0302) 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his or her physician. The resident must be cared for pursuant to any instructions provided by the resident ' s physician.	0859	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022
0876 SS= E	Medication Administration - NRS 449.0302 - NAC 449.2742 - Administration of medication: Responsibilities of administrator, caregiver and employees of facility. (as amended by LCB File No. R109-18) 4. Except as otherwise provided in this subsection, a caregiver shall assist in the administration of medication to a resident if the resident needs the caregiver's assistance. A caregiver may assist the ultimate user of: (a) Controlled substances or dangerous drugs only if the conditions prescribed in subsection 6 of NRS 449.0302 are met. (b) Insulin using an auto-injection device only if the conditions prescribed in NRS 449.0304 and section 13 of this regulation are met.	0876	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022

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0878 SS= D	Medication/OTCS, Supplements, Change Order - NAC 449.2742 - Administration of medication: Responsibilities of administrator, caregiver and employees of facility. 5. An over-the-counter medication or a dietary supplement may be given to a resident only if the resident's physician has approved the administration of the medication or supplement in writing or the facility is ordered to do so by another physician. The over-the-counter medication or dietary supplement must be administered in accordance with the written instructions of the physician. The administration of over-the-counter medications and dietary supplements must be included in the record required pursuant to paragraph (b) of subsection 1 of NAC 449.2744. 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order; (2) Indicate on the container of the medication that a change has occurred; and (Previously Y 0879) (3) Note the change in the record maintained pursuant to paragraph (b) of subsection 1 of NAC 449.2744; (b) Within 5 days after the change is ordered, a copy of the order or prescription signed by the physician must be included in the record maintained pursuant to paragraph (b) of subsection 1 of NAC 449.2744; and (c) If the label prepared by a pharmacist does not match the order or prescription written by a physician, the physician, registered nurse or pharmacist must interpret that order or prescription and, within 5 days after the change is ordered, the interpretation must be included in the record maintained pursuant to paragraph (b) of subsection 1 of NAC 449.2744.	0878	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022

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0920 SS= D	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	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022

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0936 SS= D	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: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto. Inspector Comments: Based on record review, document review, and interview, the facility failed to ensure 1 of 6 sampled residents met the requirements for tuberculosis (TB) testing (Resident #3). Findings include: Resident #3 Resident #3 was admitted to the facility on 12/20/21, with diagnoses including acute respiratory failure with hypoxia and post COVID-19 condition, unspecified. Documentation of a TB skin test for Resident #3, documented the resident had a TB test placed on 11/13/21 and read negative on 11/16/21. The resident's record lacked documentation of a second TB skin test to complete the two step TB test required for admission to the facility. On 02/17/22 at 11:00 AM, the Health and Wellness Director confirmed the resident's record did not include documentation of a completed two-step TB test and a two-step TB test was required for admission to the facility. The facility policy titled "Tuberculosis Control Plan," dated 10/01/17, documented TB testing procedures included initial testing on new residents to establish a baseline. Severity: 2 Scope: 1	0936	1) How facility will identify - Reviewing new resident move-in paper work if TB and required medical paper work not received resident move-in will ne delayed until received. 2) how facility will monitor - all new move-in paperwork is received by sales and reviewed by administrator and Director of resident care. We use a check list to confirm. 3) Responsible Party for monitoring - Administrator / Designee 4) date of correction - 2-17-22	02/17/2022

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0938 SS= D	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: (g) An evaluation of the resident ' s ability to perform the activities of daily living and a brief description of any assistance he or she needs to perform those activities. The facility shall prepare such an evaluation: (1) Upon the admission of the resident; (2) Each time there is a change in the mental or physical condition of the resident that may significantly affect his or her ability to perform the activities of daily living; and (3) In any event, not less than once each year.	0938	Please refer to original Statement of Deficiency/Plan of Correction - Event ID #MR0311.	02/17/2022