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
	129	A. BUILDING _____ B. WING _____	03/09/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAS VEGAS ALZHEIMER AND MEMORY CARE 2	3225 BRAZOS STREET, LAS VEGAS, NEVADA ,89169

(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 State Licensure voluntary grading resurvey conducted at your facility on 03/09/23, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for 10 Residential Facility for Group beds for elderly and disabled persons and/or Alzheimer's disease, Category II residents. The census at the time of the survey was eight. One resident file was 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		

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0885 SS= D	Medication - Destruction - NAC 449.2742 - Administration of medication: Responsibilities of administrator, caregiver and employees of facility. 9. If the medication of a resident is discontinued, the expiration date of the medication of a resident has passed, or a resident who has been discharged from the facility does not claim the medication, an employee of a residential facility shall destroy the medication, by an acceptable method of destruction, in the presence of a witness and note the destruction of the medication in the record maintained pursuant to NAC 449.2744. Inspector Comments: Based on observation and interview, the facility failed to destroy the expired medication of a resident (Resident #1). Findings include: On 03/09/23 at 9:20 AM, expired medication was found in the refrigerator. Medication included eight syringes containing 0.5 milliliters (ml) each of morphine, which expired 06/11/22, and Tubersol 5 unit/0.1 ml, which expired 07/28/22. Three unused needles and syringes were located in a plastic bag with the expired medication. Employee #1 (E1) acknowledged the expired medication had not been destroyed and explained the morphine had been for a resident who passed away on 01/09/23. Severity: 2 Scope: 1	0885	1. All the unused and the expired medication in the refrigerator were disposed properly. 2. Staff is reminded to destroy all unused medication of a resident who expired or transferred/discharged, in an acceptable manner and document the destruction and keep the record in the resident's file. 3. The administrator will monitor to ensure deficiency will not recur. 4. Administrator 5. 3/9/2023 6. Destruction log	03/09/2023

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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 medication was stored securely. Findings include: On 03/09/23 at 9:20 AM, medication was found in an unsecured refrigerator. The lock on the refrigerator was hanging from the hinged clasp in the open position. The tumbler mechanism of the lock was frozen; the key could not engage and open the lock. The refrigerator was located in an area accessible to residents of the facility. Employees #1 and #2 (E1 and E2) acknowledged the broken lock and the accessibility of the medication to the residents. Severity: 2 Scope: 3 This tag is a repeat deficiency from the 11/22/22 survey.	0920	1. The lock was replaced with a new one and a key that works. 2. The staff was reminded again by the administrator to always keep the refrigerator with stored medication locked at all times. 3. The administrator will monitor to ensure deficiency will not recur. 4. Administrator 5. 3/9/2023 6. Photo attached.	03/09/2023