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
	1796	A. BUILDING _____ B. WING _____	09/22/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOLDEN VALLEY GROUP CARE 2	**1140 MANHATTAN STREET, RENO, NEVADA ,89512**

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0000	Initial Comments Inspector Comments: This Statement of Deficiencies was generated as a result of a required grading re-survey conducted in your facility on 09/22/22. This State Licensure survey was conducted by the authority of NRS 449.0307, Powers of the Division of Public and Behavioral Health and in accordance with Chapter 449, Residential Facility . The facility was licensed for ten Residential Facility for Group beds for elderly and disabled person and/or persons with mental illness, Category 2 residents. The facility received a re-survey grade of B. The census at the time of the survey was nine. Nine resident files were reviewed. 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 deficiencies were identified:	0000		

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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 interview and record review, the facility failed to ensure a volunteer maintenance personnel met the requirements concerning pre-employment physical examination. Findings include: On 09/22/22 at 10:47 AM, the Maintenance personnel verbalized the Maintenance person was a volunteer at the facility. The Maintenance person explained they did not provide care at the facility and helped to maintain the facility. The Maintenance person verbalized the Maintenance person started working at the facility approximately 1.5 months ago. On 09/22/22 at 11:55 AM, the Owner verbalized the Maintenance person was a volunteer at the facility and maintained the premises. The Owner confirmed the Maintenance person did not have a pre-employment physical prior to working at the facility. The Owner verbalized the Maintenance person started working at the facility about one month ago. Severity: 2 Scope: 1	0102	TAG 0102 Personnel File - TB Screening - NAC 449.200 Personnel Files: That the Administrator will ensure that any person working as Volunteer in a facility must have the same complete files as per NAC 449.200. The Administrator will see to it that no one must work in this facility whether a regular, part time or volunteer worker/employees must obtain the necessary required documents pursuant to chapter 441A of NAC 449.200 Personnel File. That the administrator will not allow this to happen again. 10/20/2022	10/20/2022
0174 SS= F	Health& Sanitation-odors-hazards-insects-dirt - NAC 449.209 Health and sanitation. (NRS 449.0302) 4. To the extent practicable, the premises of the facility must be kept free from: (a) Offensive odors; (b) Hazards, including obstacles that impede the free movement of residents within and outside the facility; (c) Insects and rodents; and (d) Accumulations of dirt, garbage and other refuse.	0174	TAG 0174 Health and Sanitation That the Administrator will ensure that the facility will meet in compliance with the NAC 449.209 and so that the premises of the facility must be kept free from offensive Odor, Hazards, any obstacles that impeded the movement of the residents within and outside of the facility to include to avoid the accumulation of dirt, garbage and the presence of insect and rodents in the facility. That the administrator will ensure that all these things will never happen again. 10/20/2022	10/20/2022

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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	TAG 0174 Health and Sanitation That the Administrator will ensure that the facility will meet in compliance with the NAC 449.209 and so that the premises of the facility must be kept free from offensive Odor, Hazards, any obstacles that impeded the movement of the residents within and outside of the facility to include to avoid the accumulation of dirt, garbage and the presence of insect and rodents in the facility. That the administrator will ensure that all these things will never happen again. 10/20/2022	10/20/2022

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0250 SS= F	Kitchens- Equipment Works; Clean And Sanitary - NAC 449.217 Kitchens; storage of food; adequate supplies of food; permits; inspections. (NRS 449.0302) 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition. Inspector Comments: Based on observation and interview, the Administrator failed to ensure the facility was free from expired foods, with the potential to affect 9 of 9 residents. Findings include: On 09/22/22 at 10:15 AM, a 16 ounce (oz) container of cottage cheese with an expiration date of 09/05/22, and a package of sausages containing two sausages with an expiration date of 08/05/22 were located in the second refrigerator in the dining room. Six 18.5 oz cans of creamy chicken and mushroom soup with an expiration date of 09/16/22, 20 14.5 oz cans of beef broth with an expiration date of 08/04/22, one 14.5 oz can of beef broth with an expiration date of 05/26/22, one 14.5 oz can of beef broth with an expiration date of 07/28/22, and seven 14.5 oz cans of chicken broth with an expiration date of 10/05/20, were located in the hall pantry. On 09/22/22 at 10:40 AM, the Owner confirmed the items were expired and verbalized the items should have been discarded by the expiration date listed on the containers. Severity: 2 Scope: 3	0250	TAG 0250 Kitchen - Equipment works - Clean and Sanitary - NAC 449.217. That the Administrator must ensure to give instructions to owner/caregivers to look into the supplies of food stored in the storage of food area or inside the refrigerator to make sure that all food items are NOT EXPIRED. The Administrator will ensure and double check all food in the storage of food area and inside the refrigerator or Freezer and discard all expired food that are in the so called storage of food or refrigerator or freezer in order that this Statement of Deficiency will never happen again in compliance with NAC 449.217 and with NRS 449.0302. 10/20/2022 The Administrator will ensure that all Expiration of food will be check properly starting from the grocery stores and to the pantry storage and must be stored "FIRST IN FIRST OUT". That all food must be check at least every two weeks and if possible the food containers must be mark with a marker showing their EXPIRATION DATES. 11/21/2022	10/20/2022

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0272 SS= C	Service of Food - Menus - NAC 449.2175 3. Menus must be in writing, planned a week in advance, dated, posted and kept on file for 90 days.	0272	TAG 0272 Service of Food Menus NAC449.2175 That the Administrator must ensure that the caregiver must have menus in writing, planned in a week in advance, dated, posted and kept on file for 90 days or 3 months or more. The Administrator will see to it and monitor that this documents are on file, posted accurate and complete in accordance with the regulation of NAC 449.2175 and will not happen again. 10/20/2022	10/20/2022
0532 SS= C	Activities for Residents - NAC 449.260 Activities for residents. (NRS 449.0302) 1. The caregivers employed by a residential facility shall: (g) Post, in a common area of the facility, a calendar of activities for each month that notifies residents of the major activities that will occur in the facility. The calendar must be: (1) Prepared at least 1 month in advance; and (2) Kept on file at the facility for not less than 6 months after it expires.	0532	TAG 0532 Activities for Residents ; That the Administrator will ensure that the Activities of Residents - NAC 449.260 AND NRS 449.0302 are part of the caregiver's and all staff duties and responsibilities that are in writing, Posted in a common area of the facility. These must be notifies the residents that each month a major activities will happen to be participated by all residents. The Administrator must ensure that these Activities of the Residents are posted in a large Calendar to be prepared in advance for the residents to be aware of the next activities and then be kept on file at the facility for not less that 6 months after its expiration. That these Calendar of Activities must be in compliance with the regulations NAC 449.260 and under the Law of NRS 449.0302. 10/20/2022	10/20/2022

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0835 SS= D	Exemption Requests - NAC 449.2736 Procedure to exempt certain residents from restrictions. (NRS 449.0302) 3. A written request submitted to the Division pursuant to this section must be received: (a) Before the administrator admits a resident; or (b) At the onset of a medical condition set forth in NAC 449.271 to 449.2734, inclusive. Inspector Comments: Based on interview, clinical record review, and observation, the facility failed to obtain an exemption request to retain a resident who had wounds for 1 of 9 sampled residents (Resident #4). Findings include: Resident #4 Resident #4 was admitted to the facility on 03/21/21, with diagnoses including diabetes mellitus type II, chronic kidney disease stage III, and hypertension. On 09/22/22 at 12:00 PM, the Owner verbalized Resident #4 received wound care from a home health agency. The Owner verbalized the facility submitted a wound exemption to the State of Nevada and did not receive a response requesting additional information or an approval to retain the resident. Resident #2's Home Health Certification and Plan of Care, for certification period 01/07/22-03/07/22, documented Resident #4 received skilled nursing services three times a week for wound complications for a wound on the top left foot. On 09/22/22 at 1:00 PM, Resident #4 verbalized the resident had wounds on the resident's foot and a nurse came to take care of them a few times a week. Severity: 2 Scope: 1	0835	TAG 0835 Exemption Request - NAC 449.2736 Procedure to exempt certain resident from restrictions. (NRS449.0302. The Administrator must ensure that every resident who needs exemption request for any restrictions such as Wound or bedfast that needs to be reported to the Division must comply upon admission. That the Administrator will see to it that when there is an admission of resident in the facility, the administrator must ensure that there is an exemption request if the subject resident who have some restrictions like wound and or bedfast so that it will be send to the Division even before admission of the resident if determined that restrictions need to be reported to the Division so this Statement of Deficiency will not happen again and in compliance with the NAC 449.2736. 10/20/2022 Attachment # 1 - Copies of the Wound Exemption Request Documents for Resident # 1 and Resident # 4. 11/21/2022	10/20/2022
0859 SS= E	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	TAG 0859 Medical Care of Resident After Illness - NAC 449.274 Medical Care of Resident after Illness, Physical Examination of all residents must be obtained before admission and every year after admission or more frequently especially if there is a significant changes of their physical or Mental conditions (NRS 449.0302). That the administrator will ensure that resident Physical Examination must be requested from their respective Primary Care Physician (PCP) every year of more often especially if the resident have significant changes in their physical and/or Mental Condition to include their Medication	10/20/2022

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	Inspector Comments: Based on interview and clinical record review, the facility failed to ensure a physical examination including a review of systems was completed upon admission and annually for 3 of 9 sampled residents (Resident #1, #4, and #5). Findings include: Resident #1 Resident #1 was admitted to the facility on 03/07/22, with diagnoses including coronary artery disease, human immunodeficiency virus, and chronic kidney disease. Resident #1's clinical record contained a review of systems dated 07/19/21, almost eight months prior to admission. On 09/22/22 at 12:22 PM, the Owner confirmed Resident #1 did not have an admission physical examination on file. Resident #4 Resident #4 was admitted to the facility on 03/21/21, with diagnoses including diabetes mellitus type II, chronic kidney disease stage III, and hypertension. Resident #4's clinical record contained a physical examination with a review of systems dated 05/11/21. The resident's clinical record lacked documented evidence of an annual physical examination with a review of systems completed by May, 2022. On 09/22/22 at 12:11 PM, the Owner confirmed Resident #4 did not have an annual physical evaluation including a review of systems on file for the annual due for 2022. Resident #5 Resident #5 was admitted to the facility on 07/09/22, with diagnoses including hypertension, hyperlipidemia, and chronic obstructive pulmonary disease. Resident #5's clinical record contained a physical examination with a review of systems dated 01/04/21, more than 18 months prior to admission. On 09/22/22 at 11:57 AM, the Owner confirmed Resident #5 did not have an admission physical evaluation including a review of systems on file. Severity: 2 Scope: 2		Review every 6 months must be obtained in compliance with the NAC 449.274. 10/20/2022 Attachment #2 - Copies of the History and Physical Examinations documents of Residents number 1, 4 and 5. 11/21/2022	

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0870 SS= E	Medication Administration-Accuracy & Report - NAC 449.2742 Administration of medication: Responsibilities of administrator, caregiver and employees of facility. 1. The administrator of a residential facility that provides assistance to residents in the administration of medications shall: (a) Ensure that a physician, pharmacist or registered nurse who does not have a financial interest in the facility: (1) Reviews for accuracy and appropriateness, at least once every 6 months the regimen of drugs taken by each resident of the facility, including, without limitation, any over-the-counter medications and dietary supplements taken by a resident; and (2) Provides a written report of that review to the administrator of the facility. (b) Include a copy of each report submitted to the administrator pursuant to paragraph (a) in the file maintained pursuant to NAC 449.2749 for the resident who is the subject of the report. (c) Make and maintain a report of any actions that are taken by the caregivers employed by the facility in response to a report submitted pursuant to paragraph (a).	0870	TAG 0870 Medication Accuracy and Report - NAC 449.2742 That the Administrator must see to it that the Administration of Medication based on the NAC 449.2742 must be Accurate and Reported. It is the responsibilities of the Administrator of the facility to provide assistance to the residents in the administration of their medications. That the Administrator will ensure to have a list of Medications prepared and submitted to the Primary Care Physician (PCP) or the Medical Assistant Nurse or even to the Pharmacist who have no financial interest in the facility for REVIEW the accuracy and appropriateness of those Medications then sign the prepared List to be counter signed by the Administrator of the facility. These Medication LIST REVIEW must be sign by the above Medical Personnel and counter signed by the Administrator of the facility every 6 months and to be kept on file of the resident personal record files. 10/20/2022	10/20/2022

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0895 SS= A	Administration of Medication Maintenance - NAC 449.2744 Administration of medication: Maintenance and contents of logs and records. (NRS 449.0302) 1. The administrator of a residential facility that provides assistance to residents in the administration of medications shall maintain: (b) A record of the medication administered to each resident. The record must include: (1) The type of medication administered; (2) The date and time that the medication was administered; (3) The date and time that a resident refuses, or otherwise misses, an administration of medication; and (4) Instructions for administering the medication to the resident that reflect each current order or prescription of the resident ' s physician. Inspector Comments: Based on clinical record review and interview, the facility failed to ensure the Medication Administration Record (MAR) was accurate for 1 of 9 sampled residents (Resident #4). Findings include: Resident #4 Resident #4 was admitted to the facility on 03/21/21, with diagnoses including diabetes mellitus type II, chronic kidney disease stage III, and hypertension. Resident #4's Physician Order dated 07/2021, and medication on-site documented ferrous sulfate 325 milligram (mg) tablet, take one tablet by mouth Monday, Thursday, and Saturday for iron supplementation. Resident #4's September 2022 MAR documented ferrous sulfate 325 milligram (mg) tablet, take one tablet by mouth Monday, Thursday, and Saturday for iron supplementation. The September 2022 MAR was initialed by the Owner, indicating the medication was administered from September 1st through September 22. On 09/22/22 at 1:00 PM, the Owner verbalized the medication was received in a bubble pack for Resident #4 and was only administered on Mondays, Thursdays, and Saturdays. The Owner explained the Owner mistakenly initialed the MAR daily, when it should have only been initialed three days each week. Severity: 1 Scope: 1	0895	TAG 0895 Administration of Medication Maintenance NAC 449.2744 Administration of Medication. Maintenance and contents of log and records (NRS 449.0302) Medication Administration Record (MAR). That the Administrator must ensure that all caregivers must do their caregiver duties especially the Medication Administration Records in order that all logs and records must be accurately and completely performed in accordance with the required administrations of medications. The Administrator will see to it and double check the accuracy and completeness of the required administration of medication records that all daily logs are recorded correctly and accomplice in compliance with the NAC 449.2744 and the NRS 449.0302. 10/20/2022 That the Administrator together with caregiver must ensure that all entries or logs in the Medication Administration Record must be done correctly based on the Physician's Orders and from the Pharmacy's Bottles or Bubbles Packs to comply with the Regulation and must be check for accuracy at lease every two weeks to make sure that nothing is missing or inaccurate entries and if there is an error it will be corrected right away in order to avoid of such errors to happen again. 11/21/2022	10/20/2022

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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	TAG 0938 Maintenance and Content of Separate Files. NAC 449.2749 That the Administrator will ensure that each resident must have their own and separate file maintained by the facility and must be kept locked in a place that is resistance to fire and is protected against unauthorized used, the file must contain all records, letters, assessments, medical information and ny information related to the 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. 10/20/2022	10/20/2022
1700 SS= D	Annual Assessment of History of Each Resident	1700	TAG 1700 Annual Assessment of History and Physical of each Resident: That the Administrator will make sure to do our best with the owner of the facility to obtain the History and Physical Records of each Resident before admission and every year after admission to be in compliance with this regulation. 10/20/2022	10/20/2022