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
	2194	A. BUILDING _____ B. WING _____	07/07/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
A SUMMERDALE HOMES AT RIBEIRO, LLC	1868 RIBEIRO CIRCLE, RENO, NEVADA ,89503

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0000	Initial Comments Inspector Comments: This Statement of Deficiencies was generated as a result of a State Licensure annual grading survey conducted at your facility on 07/07/20. This survey was conducted by the Division of Public and Behavioral Health in accordance with NAC 449, Residential Facility for Groups. The facility is licensed for six Residential Facility for Group beds for elderly and disabled persons Category II residents. The census at the time of the survey was six. Six resident files were reviewed and three 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 deficiencies were identified:	0000		

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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. Inspector Comments: Based on record review, document review and interview, the facility failed to ensure 1 of 3 employees completed the required 8 hours of annual medication management training on a timely basis (Employee #3). Findings include: Employee #3 Employee #3 was hired as a Caregiver on 07/23/19. Employee #3's file documented an eight hour annual Medication Management training, with an expiration date of 03/25/20. Employee #3 was working and dispensing medications for approximately fifteen weeks without current Medication Management certification. On 07/07/20 at 10:38 AM, the Caregiver acknowledged the findings and confirmed Employee #3 was working and dispensing medications to residents with an expired medication management certification. Severity: 2 Scope: 1	0072	Facility is now in compliance. Employee #3 received the 16 hour initial training certificate for medication after medication training have expired. Administrator will implement the caregiver's suggestion to input all the employees and resident's annual requirements in my smart phone. Administrator will also require that the caregivers will input the same information in their smart phones so the entire staff can be on the lookout for the annual 8 hour of medication training and prevent this deficiency from recurring.	07/17/2020
0870 SS= E	Medication Administration-Accuracy & Report - NAC 449.2742 Administration of	0870	Facility is in compliance. Pharmacy was able to maintain the Rx review every 6	07/08/2020

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	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). Inspector Comments: Based on document review, record review and interview, the facility failed to ensure a medication profile review was performed by a physician, pharmacist or registered nurse at least once every six months for 3 of 6 sampled residents residing in the facility for longer than six months (Resident #2, #3, and #4). Findings include: Resident #2 Resident #2 was admitted to the facility on 12/08/18, with diagnoses including hypertension and history of falls. Resident #2's file contained a medication review dated 01/21/19, however, the next medication review was dated 01/29/20, the resident's file lacked documented evidence of a six month medication review completed by 07/21/19. Resident #3 Resident #3 was admitted to the facility on 04/07/18, with diagnoses including deep vein thrombosis and hypertension. Resident #3's file contained a medication review dated 01/18/19, however, the next medication review was dated 01/29/20, the residents' file lacked documented evidence of a six month medication review completed by 07/18/19. Resident #4 Resident #4 was admitted to		months for 2020. Administrator has requested that the pharmacy schedule their Rx review every six months on a timely basis. The administrator and the entire staff will program the renewal dates for each resident in their phone to contact the pharmacy for a timely medication review every six months. Caregivers were reminded that medication reviews are required every six months.	

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	the facility on 12/29/17, with diagnoses including stroke and type II diabetes mellitus. Resident #4's file contained a medication review dated 01/18/19, however the next medication review was dated 01/29/20, the resident's file lacked documented evidence of a six month medication review completed by 07/18/19. On 07/07/20 at 11:35 AM, the Caregiver verbalized the pharmacy review's had been completed annually and was unaware of the requirement for pharmacy reviews to be completed at least once every six months. Severity: 2 Scope: 2			
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	0878	Medication for resident #2 was discontinued per doctor's request on February 21, 2020. Administrator will require caregiver on duty to text him immediately for any medication changes so he can update his computer on a timely basis to prevent errors in the MAR which is pre-printed one week before the 1st day of the following month. Administrator will be filing the Rx prescription for all residents and require the caregivers to keep the paperwork in the MAR for the administrator to review before it is filed in the resident's binder.	07/07/2020

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	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. Inspector Comments: Based on observation, interview and record review, the facility failed to ensure medications were on-site to administer as prescribed for 1 of 6 sampled residents (Resident #2). Findings include: Resident #2 Resident #2 was admitted on 07/07/20 with diagnoses including hypertension and history of falls. The resident's physician order and Medication Administration Record documented Trospium Chloride 20 milligrams, take one tablet by mouth at bedtime. However, the medication was not on-site to admnister as prescribed. On 07/07/20 at 12:05 PM, the Caregiver confirmed the medicaiton was not on-site. Severity: 2 Scope: 1			
0936 SS= E	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 and interview, the facility failed to ensure 4 of 6 sampled residents met the requirements concerning tuberculosis (TB) testing (Residents #1, #2, #3, and #4) Findings include: Resident #1 Resident #1 was admitted on 03/18/19 with diagnoses including chronic obstructive pulmonary disease. Resident #1's file contained a two-	0936	2 step TB tests for residents were completed. Administrator will implement the caregiver's suggestion to input all the resident's annual TB tests on the staff's smart phones to prevent recurring deficiencies. This new approach will ensure that the administrator will have an RN scheduled to perform the TB tests at least 1 -2 weeks before the TB tests expires.	07/13/2020

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	step TB test with a read date for the second step of 03/28/19 with a negative result and an annual one-step TB test with a read date of 07/03/20. The TB test had not been placed and read within 12 months of the previous negative result. Resident #2 Resident #2 was admitted on 12/08/18, with diagnoses including hypertension and history of falls. Resident #2's file contained an annual one-stepTB test with a read date of 03/23/19 with a negative result. The next annual TB test had a read date of 07/03/20 with a negative result. The TB test had not been placed and read within 12 months of the previous negative result. Resident #3 Resident #3 was admitted on 04/07/18, with diagnoses including deep vein thrombosis and hypertension. Resident #3's file contained an annual one-step TB test with a read date of 03/23/19 with a negative result. The next annual TB test had a read date of 07/03/20 with a negative result. The TB test had not been placed and read within 12 months of the previous negative result. Resident #4 Resident #4 was admitted on 12/29/17, with diagnoses including stroke and type II diabetes mellitus. Resident #4's file contained an annual one-step TB test with a read date of 03/23/19 with a negative result. The next annual TB test had a read date of 07/03/20 with a negative result. The TB test had not been placed and read within 12 months of the previous negative result. On 07/07/20 at 11:33 AM, the Caregiver verbalized the annual TB tests for Residents #1, #2, #3, and #4, had been placed and read late. The Caregiver verbalized the TB testing had been overlooked and the the tests had not been placed and read within the 12 month time period. Severity: 2 Scope: 2			