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
	3119	A. BUILDING _____ B. WING _____	11/18/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DESERT INN RESIDENTIAL CARE	2845 BURNHAM AVENUE, LAS VEGAS, NEVADA ,89109

(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 annual State Licensure at your facility on 11/18/19, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for four Residential Facility for Group beds for persons with Alzheimer's disease, Category II residents. The census at the time of the survey was four. Four resident files were reviewed and two employee files were reviewed. The facility received a grade of B. 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		
0088 SS= C	Staffing Schedule - NAC 449.199 Staffing requirements 4. The administrator of a residential facility shall maintain monthly a written schedule that includes the number and type of members of the staff of the facility assigned for each shift. The schedule must be amended if any changes are made to the schedule. The schedule must be retained for at least 6 months after the schedule expires. Inspector Comments: Based on observation and interview on 11/18/19, the facility failed to ensure a current staff schedule was posted. Severity: 1 Scope: 3	0088	1) The administrator will correct this specific deficiency by post alway the staff schedules at all time . 2) The administrator will systematic change will be put into place to ensure the deficient practice does not recur by posting the schedule 1 month in advance that will be posted at always visible to see. 3) In order corrective action will be monitored to ensure the deficient practice will not recur is by posting a month ahead of time. 4) The administrator 5) 11/18/19	11/18/2019

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: JASMINE CASTILLO Title: Administrator Date: 12/17/2019

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0170 SS= F	Health And Sanitation-Safe Water & Sewage - NAC 449.209 Health and sanitation. (NRS 449.0302) 1. A residential facility must: (a) Have a safe and sufficient supply of water, adequate drainage and an adequate system for the disposal of sewage. Inspector Comments: Based on observation and interview, the facility failed to ensure a bathroom sink and toilet was functional (sink and toilet were inoperable) for over a week. The Administrator and Caregiver confirmed the observation. Severity: 2 Scope: 3	0170	1) The administrator corrected this specific deficiency while the surveyor was on site. The plumber came and fixed the bathroom issue on that day. 2) The administrator will systematic change will be put into place to ensure the deficient practice does not recur by contacting the plumber ASAP if another person is not available administrator will contact another person to be resolve right away . 3) In order corrective action will be monitored to ensure the deficient practice will not recur is not to wait for one person always contact another person ASAP. 4) The administrator 5) 11/18/19	11/18/2019
0174 SS= D	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. Inspector Comments: Based on observation and interview, the facility failed to ensure an inoperable bathroom was free from an strong offensive odor. Severity: 2 Scope: 1	0174	1) The administrator corrected this specific deficiency while the surveyor was on site. The plumber came and fixed the bathroom issue on that day and odor was controlled . 2) The administrator will systematic change will be put into place to ensure the deficient practice does not recur by contacting the plumber ASAP if another person is not available administrator will contact another person to be resolve right away . 3) In order corrective action will be monitored to ensure the deficient practice will not recur is not to wait for one person always contact another person ASAP. 4) The administrator 5) 11/18/19	11/18/2019
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. Inspector Comments: Based on record review and interview, the facility failed to ensure the premise was well maintained as evidenced by: -The inside of two kitchen cabinets had dead roaches and dirt build-	0178	1) The administrator will make sure that all caregivers on duty should clean 1.The inside of two kitchen cabinets had dead roaches and dirt build-up 2. Two refrigerators had food stains on shelves 3. Private bathroom in residents room mirror and toilet had dirt build-up 4. Laundry room had excess of lint on floor and clothes piled up	11/23/2019

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	up. -Two refrigerators had food stains on shelves -Private bathroom in residents room mirror and toilet had dirt build-up. -Laundry room had excess of lint on floor and clothes piled up. -Yard had an accumulation of leaves scattered throughout back and front yard. -Backyard had an inoperable exercise machine, two toilet commodes, books and linens, a ironing board, small toy pony and excess of trash and paper. The Caregiver and Administrator acknowledged the premises were not cleaned and maintained. Severity: 2 Scope: 3		5. Backyard had an inoperable exercise machine, two toilet commodes, books and linens, a ironing board, small toy pony and excess of trash and paper. All 1 thru 5 list has been clean by the staff and administrator seen. 2) The administrator will monitor and check all area where 1.The inside of two kitchen cabinets had dead roaches and dirt build-up. - 2. Two refrigerators had food stains on shelves 3. Private bathroom in residents room mirror and toilet had dirt build-up 4. Laundry room had excess of lint on floor and clothes piled up 5. Backyard had an inoperable exercise machine, two toilet commodes, books and linens, a ironing board, small toy pony and excess of trash and paper. 3) In order the corrective action will be monitored to ensure the deficient practice will nor recur is after all the issue been corrected and if the administrator find out that any of staff it should be clean ASAP at no given time. 4) The administrator will ensure the plan of correction is implemented. 5) 11/18/19	