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 _____	**07/21/2022**

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

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0000	Initial Comments Inspector Comments: This Statement of Deficiencies was generated as a result of a complaint investigation completed in your facility on 07/21/22, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The census at the time of the survey was three. The sample size was three. Three resident records and four staff records were reviewed. The facility received a grade of A. There was one complaint investigated. Complaint #NV00066364 with three allegations was substantiated. Allegation #1 - A Caregiver with expired Medication Administration training was administering medication to residents was substantiated, see TAG 0072. Allegation #2 - A Caregiver with expired Elder Abuse training continued to work at the facility was substantiated, see TAG 0074. Allegation #3 - The outside physical environment of the facility, which included an area near the recycle bin in front of the facility had a large pile of used empty boxes thrown about. Another area in the front of the facility with a pile of cigarette butts and debris, and an area in the back of the facility with several broken ceramic tiles was scattered about was unsubstantiated based on observation of the outside physical environment of the facility, which was clear of boxes, cigarette butts and debris and was clean and tidy. An area in the back of the facility had no broken ceramic tiles and was also clean and tidy. The investigation into the allegations included: Observation of the outside physical environment of the facility. Interviews with three residents and the Lead Caregiver. Record review of three residents and four Caregivers, including the facility Administrator. 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	0000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Name: JASMINE CASTILLO Title: Administrator Date: 08/13/2022

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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	to any party under applicable federal, state, or local laws. The following regulatory 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. Inspector Comments: Based on interview and record review, the facility failed to ensure a minimum of eight hours of annual training related to the administration of medication to residents was completed for 1 of 4 employees (Employee #4). Employee #4 (E4) E4 was hired on 09/10/18. A review of E4's record did not reveal a current certificate of annual training of a minimum of eight hours of medication administration. The most current certificate in E4's file had expired on 03/07/22. On 07/21/22 in the afternoon, this finding was confirmed by the Lead Caregiver/Administrator Designee who indicated the importance of maintaining	0072	1. The facility address this deficiency employee #4 didn't get his medication updated training from from his other employer on file from his current employer. The administrator will correct this deficiency by making sure that all employee must have updated at all time on file. 2. In order this deficiency will not recur all employees medication training file must be in file at the facility and any training it's not on file employee should updated in needed. 3. The administrator will monitor to ensure the deficiency will not recur that all medication training of each employee must me on file at all times and must be current and updated . 4. The Administrator is responsible for ensuring this plan of correction . 5. Aug. 1, 2022 6. Please see attachment	08/13/2022

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	current employee training records. The Medication Administration Record (MAR) documented E4 had been administering medication to residents from January of 2022 through April of 2022 and from June of 2022 to the present. The Designee also confirmed this finding and indicated the importance of having currently trained Caregivers administering medication to residents. Severity: 2 Scope: 1			
0074 SS= D	Elder Abuse Training - NRS 449.093 Training to recognize and prevent abuse of older persons: Persons required to receive; frequency; topics; costs; actions for failure to complete. 1. An applicant for a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before a license to operate such a facility, agency or home is issued to the applicant. If an applicant has completed such training within the year preceding the date of the application for a license and the application includes evidence of the training, the applicant shall be deemed to have complied with the requirements of this subsection. 2. A licensee who holds a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must annually receive training to recognize and prevent the abuse of older persons before the license to operate such a facility, agency or home may be renewed. 3. If an applicant or licensee who is required by this section to obtain training is not a natural person, the person in charge of the facility, agency or home must receive the training required by this section. 4. An administrator or other person in charge of a facility for intermediate care, facility for skilled nursing,	0074	1. The facility address this deficiency employee #4 didn't get his elder abuse updated training from from his other employer on file from his current employer. The administrator will correct this deficiency by making sure that all employee must have updated at all time on file. 2. In order this deficiency will not recur all employees elder abuse training file must be in file at the facility and any training it's not on file employee should updated in needed. 3. The administrator will monitor to ensure the deficiency will not recur that all elder abuse training of each employee must me on file at all times and must be current and updated . 4. The Administrator is responsible for ensuring this plan of correction . 5. Aug. 1, 2022 6. Please see attachment	08/13/2022

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	agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before the facility, agency or home provides care to a person and annually thereafter. 5. An employee who will provide care to a person in a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before the employee provides care to a person in the facility, agency or home and annually thereafter. 6. The topics of instruction that must be included in the training required by this section must include, without limitation: (a) Recognizing the abuse of older persons, including sexual abuse and violations of NRS 200.5091 to 200.50995, inclusive; (b) Responding to reports of the alleged abuse of older persons, including sexual abuse and violations of NRS 200.5091 to 200.50995, inclusive; and (c) Instruction concerning the federal, state and local laws, and any changes to those laws, relating to: (1) The abuse of older persons; and (2) Facilities for intermediate care, facilities for skilled nursing, agencies to provide personal care services in the home, facilities for the care of adults during the day, residential facilities for groups or homes for individual residential care, as applicable for the person receiving the training. 7. The facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care is responsible for the costs related to the training required by this section. 8. The administrator of a facility for intermediate care, facility for skilled nursing or residential			

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	facility for groups who is licensed pursuant to chapter 654 of NRS shall ensure that each employee of the facility who provides care to residents has obtained the training required by this section. If an administrator or employee of a facility or home does not obtain the training required by this section, the Division shall notify the Board of Examiners for Long-Term Care Administrators that the administrator is in violation of this section. 9. The holder of a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care shall ensure that each person who is required to comply with the requirements for training pursuant to this section complies with such requirements. The Division may, for any violation of this section, take disciplinary action against a facility, agency or home pursuant to NRS 449.160 and 449.163. Inspector Comments: Based on interview and record review, the facility failed to ensure annual training related to the recognition and prevention of abuse of elder persons was completed for 1 of 4 employees (Employee #4). Employee #4 (E4) E4 was hired on 09/10/18. A review of E4's record did not reveal a current certificate of annual training for elder abuse. There were no past certificates of training for elder abuse in E4's record. On 07/21/22 in the afternoon, this finding was confirmed by the Lead Caregiver/Administrator Designee who indicated the importance of maintaining current employee training records. Severity: 2 Scope: 1			