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
	339	A. BUILDING _____ B. WING _____	06/29/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PRIME CARE FACILITY	**4920 RONAN DRIVE, LAS VEGAS, NEVADA ,89110**

(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 an annual State Licensure survey conducted in your facility on 06/29/17. This State Licensure survey was conducted by the authority of NRS 449.0307, Powers of the Division of Public and Behavioral Health. The facility is licensed for seven Residential Facility Low Income Beds for persons with mental illness. The census at the time of the survey was seven. Seven resident files were reviewed and two 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 deficiencies were identified:	0000		

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: JOSEFINA ADAMS Title: Administrator Date: 07/16/2017

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0859 SS= D	449.274(5) - Periodic Physical examination of a resident - 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. 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 physician. The resident must be cared for pursuant to any instructions provided by the resident's physician. Inspector Comments: Based on record review and interview, the facility failed to ensure 1 out of 7 residents had a physical examination prior to admission and/or an annual physical examination (Resident #7). Findings include: On 06/29/17 in the morning, a review of files for the following resident revealed: -Resident #7 was admitted on 09/03/96. The resident had a physical exam on 04/30/15 and 02/06/17. There was no documented evidence a physical was completed in 2016. On 06/29/17 in the morning, Employee #2 acknowledged the findings and was unable to provide the requested documentation. Severity: 2 Scope: 1	0859	0859- Resident #7 had a physical examination last February 2, 2016. I forgot to request the documents. I was able to get a copy of his physical assessment July 12, 2017. See attached documents. Prime Care Facility created an annual residences check list form to insure residence records are complete, accurate, and current. The component of the system must be incorporated into a policy for future use for current and new residence and to guarantee files are updated as residence information changes.	07/16/2017
0878 SS= E	NAC 449.2742(5)(6) - Medication / OTCs, Supplements, Change Order - NAC 449.2742 Administration of medication: Responsibilities of administrator, caregivers 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	0878	0878- Resident #1 Fluticasone 50 mg has been refilled 07-06-2017. Amox T.R. 875 .125 mg. The physician who prescribed the medication retired. He referred the resident #1 patient to another Infection Disease Assoc. Resident #1 had an appointment 07-11-2017.He had blood work done. The new physician will prescribe needed medication when the blood results come in. This medication has been remove from his medication log. Resident #2 Hydrochiorothiazid does not have a refill yet. The physician will see the resident #2 07-21-2017. This medication has been removed from the log. Resident #7 Ranitidine has no refill. I left a message to the physician to give me a prescription discontinue. This medication has been removed from the log. Prime Care Facility created a monthly medication check up log. The first employee	07/16/2017

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	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 (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 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, record review and interview, the facility failed to ensure medications were on site to administer for 3 of 7 residents (Residents #1, #2, and #7). Findings include: On 06/29/16 in the morning, review of the medications, physician orders and MARs for the following residents revealed: Resident #1 - Physician order and MAR documented the following: - Fluticasone 50 milligram(mg) spray, spray into nostril two times a day, last initialed as administered on 06/29/17 in the AM. - Amox TR 875-125 mg, 1 tablet two times a day, last initialed as administered on 06/28/17 in the AM. Medications were not on site to administer and discontinued orders were not available. Employee #1 reported insurance would not cover the nose spray and the other medication was pending refill and provided a refill request dated 06/29/17. Resident #2 - Physician order and MAR documented the following: - Hydrochlorothiazide 12.5 mg, one tablet in AM, last initialed as administered on 06/29/17 in the AM. Medication was not on site to administer and discontinued orders		will fill out the monthly medication log. The second employee will verify the accuracy of the information. (See attracted document) The component of the medication check log is to insure any changes in information will be corrected. This system is to insure this deficiency will not occur again.	

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	were not available. Employee #1 reported the medication was pending refill and provided a refill request dated 06/29/17. Resident #7 - Physician order and MAR documented the following: - Ranitidine 300 mg, one tablet in PM, last initialed as administered on 06/28/17 at 7:00 PM. Medication was not on site to administer and discontinued orders were not available. Employee #1 reported the medication was pending refill and provided a refill request dated 06/29/17. On 9/21/16 in the afternoon, Employee #2 acknowledged the medications were not available on site. Severity: 2 Scope: 2			

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0936 SS= D	449.2749(1)(e) - Resident file-NRS 441A Tuberculosis - NAC 449.2749 Maintenance and contents of separate file for each resident; confidentiality of information. 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he 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 1 of 7 residents met the requirements concerning tuberculosis (TB) (Residents #3). Findings include: On 06/29/17 in the morning, a review of resident files revealed the following: - Resident #3 was admitted on 08/01/16. The resident's file contained evidence of a two step TB test completed on 04/25/14 with a negative result. There was documented evidence of negative single step TB tests completed in 2016 and 2017, however, there was no documented evidence a TB test was completed in 2015 or a two step TB test had been repeated again prior to admission. On 06/29/17 in the morning, Employee #2 acknowledged the deficiency and was unable to provide the requested documentation. Severity: 2 Scope: 1	0936	0936 - Resident #3 was admitted 08-01-2016. Had a TB test (step 1 and 2) given 01-15-2014. I was not able to get the documents for step 1 and 2. 06-30-2017 I got the document and forwarded to the surveyor the same day. Prime Care Facility created a annual check list to verify the Residence records are complete, accurate, and current so this deficiency will not occur again. Prime Care Facility will follow all requirements stated form Division of Public and Behavioral Health and will not deviate from the rules specified. We will continue to corroborate.	07/16/2017