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
	3643	A. BUILDING _____ B. WING _____	08/12/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HACIENDA HILL MANOR	**5544 SURREY STREET, LAS VEGAS, NEVADA ,89119**

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0000	Initial Comments Inspector Comments: This Statement of Deficiencies was generated, as a result of an annual State Licensure survey initiated at your facility on 08/12/25, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for six Residential Facility for Group beds for elderly and disabled persons and/or persons with Alzheimer's disease, Category II residents. The census at the time of the survey was six. Six resident files and five 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 deficiencies were identified:	0000		

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0065 SS= D	Qualifications of Caregivers-Age-Eng-Training - NAC 449.196 and LCB File No. R043-22 Qualifications and training of caregivers. (NRS 449.0302) 1. A caregiver of a residential facility must: (a) Be at least 18 years of age; (b) Be responsible and mature and have the personal qualities which will enable him or her to understand the problems of elderly persons and persons with disabilities; (c) Understand the provisions of NAC 449.156 to 449.27706, inclusive, and sections 2 to 16 inclusive of this regulation and sign a statement that he or she has read those provisions; (d) Demonstrate the ability to read, write, speak and understand the English language; (e) Possess the appropriate knowledge, skills and abilities to meet the needs of the residents of the facility; and (f) Not later than 60 days after commencing employment with the residential facility, receive not less than 4 hours of a combination of tier 1 and tier 2 training related to care for the residents of the facility; and (g) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility. Such training must include, without limitation, at least 2 hours of tier 2 training. Inspector Comments: Based on record review and interview, the facility failed to ensure 1 of 5 employees had completed annual caregiver training (Employee #5). Findings include: Employee #5 (E5) E5 was hired on 04/12/23 as a Caregiver. E5's file documented E5 received eight hours of annual Caregiver training on 07/02/24. E5's file lacked documented evidence E5 completed an additional three hours of annual Caregiver training in 2025. On 08/12/25 in the morning, the Lead Caregiver acknowledged the missing Caregiver training and reported the training was not completed. Severity: 2 Scope: 1	0065	Caregiver training was on file, taken 7/1/25 Manager will organize employee file so that trainings are arraigned successively for easier visibility. Completed 8/16/25	08/16/2025

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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 an annual signs and symptoms questionnaire was completed annually for 1 of 5 employees (Employee #2). Findings include: Employee #2 (E2) E2 was hired on 07/12/19, as a Caregiver. E2's file revealed a negative chest x-ray completed on 02/19/21 and a positive TB test dated 02/13/21. E2's file documented a TB signs and symptoms questionnaire dated 02/13/24. E2's file lacked documented evidence of an annual signs and symptoms questionnaire. On 08/12/25 in the morning, the Lead Caregiver acknowledged the missing signs and symptoms questionnaire and verbalized the questionnaire should be completed annually. Severity: 2 Scope: 1	0102	Administrator completed the yearly Signs & Symptoms for E2 on 8/13/25 Lead caregiver will check employee files periodically and notify Administrator of any files that need to be updated 9/15/25 Administrator will check all employee books at least once a month to ensure all files are updated accordingly 9/15/25	08/13/2025

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0106 SS= F	Personnel File - 1st Aid & CPR - NAC 449.200 Personnel files 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1: (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation; Inspector Comments: Based on record review and interview, the facility failed to ensure 3 of 5 sampled employees received cardiopulmonary resuscitation (CPR) training (Employee #2, #3, and #4). Findings include: Employee #2 (E2) E2 was hired on 07/12/19, as a Caregiver. E2's CPR expired on 06/27/25. E2's file lacked documented evidence of current first aid and CPR training. Employee #3 (E3) E3 was hired on 07/01/23, as a Caregiver. E3's CPR expired on 11/13/24. E3's file lacked documented evidence of current first aid and CPR training. Employee #4 (E4) E4 was hired on 08/01/21, as a Caregiver. E4's CPR expired on 02/07/25. E4's file lacked documented evidence first aid and CPR training was completed in-person. On 08/12/25 in the afternoon, the Lead Caregiver acknowledged the missing documentation and was unable to provide the employees current first aid and CPR training. Severity: 2 Scope: 3	0106	CPR documentation added to employee files & corrected on 8/13/25 Administrator will monitor to ensure updated certifications are added to employee files 8/25/25	08/13/2025
0878 SS= D	Medication/OTCS, Supplements, Change Order - NAC 449.2742 and R043-22 - 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 , physician assistant or advanced practice registered nurse has approved the administration of the medication or supplement in writing or the facility is ordered to do so by another physician, physician assistant or advanced practice registered nurse. The over-the-counter medication or dietary supplement must be administered in accordance with the written instructions of the physician, physician assistant or advanced practice registered nurse. The administration of over-the-counter medications and dietary	0878	Administrator called resident's family member to bring the medication right away (8/13/25) resident's family member said they got busy and that's why they didn't bring the medication Administrator mentioned the alternative of using the medication delivery service (CNS) used by the facility, but the family member declined saying she wants to use their pharmacy Administrator notified primary care doctor of the missed doses on 8/13/25 On 8/15/25 Resident was at their scheduled dialysis, however the resident was brought to the hospital where she passed several days later. Lead caregiver will notify administrator of	08/13/2025

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	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, physician assistant or advanced practice registered nurse must be administered as prescribed by the physician, physician assistant or advanced practice registered nurse. If a physician, physician assistant or advanced practice registered nurse 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, physician assistant or advanced practice registered nurse 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, physician assistant or advanced practice registered nurse, a 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 record review and interview, the facility 1) failed to ensure the Medication Administration Record (MAR) was accurate, 2) failed to ensure a resident's record had documented evidence a physician was notified after a resident had missed medications and 3) failed to ensure a resident received medications per the physicians' orders for 1 of 6 sampled residents. (Resident #4) Resident #4 (R4) R4 was admitted on 08/08/25 with a diagnosis of other specified myopathies. A physician's order dated 08/07/25 prescribed Folic Acid, 0.8 milligrams (mg) with instructions to take one		any new admissions prior to the resident being admitted so that administrator can be onsite to do medication reconciliation for the new patient. (8/25/25)	

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	tablet by mouth daily. The August 2025 Medication Administration Record (MAR) did not list Folic Acid as a prescribed medication, nor document it's administration. On 08/12/25 in the afternoon, the medication was not onsite. There was no documented evidence the Folic Acid had been administered to R4 since their arrival at the facility on 08/08/25. There was no documented evidence the physician was notified after the missed doses of medication. On 08/12/25 in the afternoon, the Lead Caregiver acknowledged R4's Folic Acid was not administered per the physician's order because it was not onsite. The Lead Caregiver confirmed the facility had no documented evidence R4's physician was notified after the missed dose and acknowledged the MAR was inaccurate. Severity: 2 Scope: 1			

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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. Inspector Comments: Based on record review and interview, the facility failed to ensure an initial Activities of Daily Living (ADL) Assessment and an initial Person-Centered Service Plan was completed for 1 of 6 residents. (Resident #4) Findings include: Resident #4 (R4) R4 was admitted on 08/08/25, with a diagnosis of other specified myopathies. R3's file lacked documented evidence of an initial ADL assessment and an initial Person-Centered Service Plan. On 08/13/25 in the afternoon, the Lead Caregiver acknowledged R4's missing initial ADL assessment and initial Person-Centered Service Plan. Severity: 2 Scope: 1	0938	ADL for resident completed on 8/13/25 Administrator will be on-site for all future admissions to ensure that all documents are completed 8/25/25 Lead Caregiver will monitor for any changes in ADL and notify Administrator to update any ADL files 9/10/25 New ADL Uploaded 9/22/25	08/13/2025