

Division of Public and Behavioral Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 3730	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/06/2023
NAME OF PROVIDER OR SUPPLIER IN TOUCH RESIDENTIAL CARE II		STREET ADDRESS, CITY, STATE, ZIP CODE 7457 WALNUT CREEK DRIVE, LAS VEGAS, NEVADA ,89147		
(X4) ID PREFIX TAG 0000	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) Initial Comments Inspector Comments: This Statement of Deficiencies was generated as a result of an annual grading and infection control State Licensure survey conducted at your facility on 04/18/22, in accordance with Nevada Administrative Code, Chapter 449, Residential Facility for Groups. The facility is licensed for eight Residential Facility for Group beds for elderly and disabled persons and/or persons with mental illness and/or persons with chronic illness, Category I residents. The census at the time of the survey was Eight. Eight resident files 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 investigation, actions or other claims for relief that may be available to any party under applicable federal, state or local laws. The following deficiency was identified:	ID PREFIX TAG 0000	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
0178 SS= D	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 observation and interview, the facility failed to ensure the exterior and interior of the facility was well maintained. Findings include: On 04/06/23 at 9:00 AM, the back yard patio area, rocked areas with pavers and near fenced areas were overgrown with weeds. There were copious amounts of cigarette butts in the graveled area of the yard and patio. On 04/06/23 at 9:15 AM, the interior walls of the dining room area and hallways leading to resident rooms had accumulations of visible dirt and dust. Pictures and signage in the dining area and hallways had accumulations of visible dirt and dust. Light fixtures and sprinkler heads in the dining area had accumulations of visible dirt and dust. On 04/06/23 at 9:20 AM, the centrally located bathroom had an	0178	1) The administrator immediately cleaned and dusted the areas that needed attention; called and scheduled for a landscaper to clean and pull weeds; called and scheduled for maintenance to fix, replace, and paint drywall behind the toilet in room #4 2) The cigarette butts in the graveled area has been picked up and cleaned. Date of Compliance: 4/6/2023 3) The over grown weeds had been removed and backyard cleaned. Date of Compliance: 4/8/2023 4) The dirt and dust on the walls from	04/17/2023 3

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 Name: TERESITA ENRIQUEZ Title: Administrator
REPRESENTATIVE'S SIGNATURE

Date: 04/17/2023

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	area of drywall behind the toilet about two feet by 2 feet in diameter, which appeared cracked, misshapen with a black and brown substance and needed to be repaired. The sink in the centrally located bathroom had accumulations of visible dirt and dust. On 04/06/23 at 11:30 AM, the Administrator acknowledged the exterior and the interior of the facility needed cleaning and repair. Severity: 2 Scope: 1		dining area, hallways, and centrally located bathroom had been dusted and cleaned up. Date of Compliance: 4/6/2023 5) The drywall behind the toilet located in room #4 had been repaired, replaced and painted. Date of Compliance: 4/14/2023 6) The administrator shall continue to ensure that the interior and exterior of the facility is well maintained; dusting interior of the house at least twice a week and/or as needed; checking and reminding clients to properly dispose of cigarette butts in the designated ashtrays and/or bins instead of disposing them on the ground	