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
	413	A. BUILDING _____ B. WING _____	10/03/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ATRIA SUMMIT RIDGE	4880 SUMMIT RIDGE DRIVE, RENO, NEVADA ,89523

(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 State Licensure annual survey conducted in your facility on 10/03/2024, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for 85 Residential Facility for Group beds for elderly and disabled persons, and/or chronic illness, and/or mental illness and/or providing assisted living services, 63 Category I residents and 22 Category II residents. The census at the time of the survey was 74. Fifteen resident files were reviewed and ten 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		
0920 SS= D	Medication: Storage - NAC 449.2748 Medication: Storage; duties upon discharge, transfer and return of resident. (NRS 449.0302) 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medications for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself or herself without supervision may keep the resident ' s medication in his or her room if the medication is kept in a locked container for which the facility has been provided a key. 2. Medication stored in a refrigerator, including, without limitation, any over-the-counter medication, must be kept in a locked box unless the refrigerator is locked or is located in a locked room.	0920	Tag 0920: The unsecured medications referenced have since been secured and the regulations have been discussed with the residents and their families. Housekeeping and Care Staff have been provided with a form to complete if they see unsecured medications. The Executive Director and Resident Services will be responsible for correcting the issue and reminding the resident and their families of the policy. To monitor compliance going forward Department Directors will continue to do room checks on their manager on duty day weekly to ensure all medications are locked and properly stored in the resident’s apartments. Each Department Director has been assigned certain apartments on the first and second floor.	10/04/2024

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	Inspector Comments: Based on observation, document review, and interview, the facility failed to ensure resident medications were kept secured in the facility for 2 of 27 resident rooms with residents self-administering medication (Room #232 and #201). Findings include: On 10/03/2024, the following resident rooms contained unsecured medications: Room 232 - at 10:40 AM, the self-medicating resident was present in the room. The following medications were stored in a plastic bin on the bathroom sink and in an unlocked bathroom: - a 100-count bottle of 500 milligrams (mg) extra strength Tylenol - an 80-count bottle of Nature Made 1000 micrograms (mcg) energy B12 gummies - two bottles of Nystop topical powder - a box of Aspercreme lidocaine patches - a box of store brand anti-diarrheal On 10/03/2024 at 10:40 AM, the resident verbalized the Maintenance Director had installed a lock on the closet door to securely store medications; however, the resident did not store medications in the closet. The resident verbalized the corridor door was not always locked when the room was not occupied. Room 201 - at 10:49 AM, the self-medicating resident was sitting in the hallway outside the room. The following medications were stored in a locked cabinet; however, the resident's corridor door was unlocked and the cabinet's key was left in the keyhole: - a container of Triamcinolone Acetonide 0.1% cream - a bag of Halls cough drops - a bottle of 325 mg Aspirin - a bottle of Tamsulosin HCL 0.4 mg capsules On 10/03/2024 at 10:49 AM, the Maintenance Director verbalized the resident had poor eyesight and had difficulty using a key to unlock the corridor door. The Maintenance Director verbalized to the resident was to keep the key to the medicine cabinet with them when not in the room. On 01/23/24 at 10:40 AM through 10:49 AM, the Maintenance Director confirmed the residents self-administered their medications and the medications were not secured. Scope: 2 Severity: 1			
1505 SS= D	Posting of Notice - Posting of Notice R016-20 Sec. 9 In addition to the statement	1505	Tag1505: The website has been updated and the nondiscrimination	10/07/2024

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	prescribed by paragraph (b) of subsection 2 of NRS 449.101, a facility shall post prominently in the facility and include on any Internet website to market the facility: 1. Notice that a patient or resident who has experienced prohibited discrimination may file a complaint with the Division; and 2. The contact information for the Division. R016-20 Sec. 10 1. The statement required to be posted pursuant to paragraph (b) of subsection 2 of NRS 449.101 and the notice and information required to be posted pursuant to subsection 3 of NRS 449.101 or section 9 of this regulation, as applicable, must: (a) State the name of the facility; and (b) When posted in the facility: (1) Be not less than 8.5 inches in height and 11 inches in width, with margins not greater than 0.5 inches on any side; and (2) Be written using a single typeface in not less than 22-point type. R016-20 Sec. 10 2. When posting prominently the statement required to be posted pursuant to paragraph (b) of subsection 2 of NRS 449.101 and the notice and information required to be posted pursuant to subsection 3 of NRS 449.101 or section 9 of this regulation, as applicable, the facility shall post the statement or notice and information in each: (a) Public entrance of the facility; (b) Waiting room of the facility; and (c) Public dining room of the facility. Inspector Comments: Based on observation and interview, the facility failed to ensure nondiscrimination posting and complaint contact information for the Division was posted on the facility's Internet website. Findings include: On 10/03/2024 at 2:00 PM, the facility's internet website, used to market the facility, lacked documented evidence of information related to nondiscrimination and the contact information for the Division to file a complaint. On 10/03/2024 at 2:09 PM, the Executive Director confirmed the facility's internet website lacked a nondiscrimination posting and complaint contact information for the Division. The Executive Director verbalized not having been aware of the requirement of a nondiscrimination posting and complaint contact information on the facility's website. Severity: 2 Scope: 1		posting, and complaint contact information for the Division Nevada has been added to the community's website	

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