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 _____	**08/14/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BELLA CARE HOME	**5905 CONCERT DR, LAS VEGAS, NEVADA ,89107**

(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 complaint investigation completed in your facility on 08/14/25, in accordance with Nevada Administrative Code, Chapter 449, Requirements for Residential Facilities for Groups. The facility is licensed for ten Residential Facility for Group beds for elderly or disabled persons and/or persons with Alzheimer's disease or related dementia, Category II. The census at the time of the survey was nine. The sample size was nine. The facility received a grade of A. There was one complaints investigated: Substantiated: 1. Complaint #NV00074821 was substantiated. (See Tag Y0181). The investigation into the complaint included: Observations of hot temperature in multiple rooms of the home, lack of air conditioning and lack of portable air conditioning. Interviews were conducted with a repair company representative, the Administrator, the Owner, Caregivers and residents. Document review included facility incident reports, repair invoices and receipts. 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 regulatory deficiency was identified:	0000		
0181 SS= H	Health & Sanitation-Temperature - NAC 449.209 Health and sanitation. (NRS 449.0302) 8. The temperature in the facility must be maintained at a level that is not less than 68 degrees Fahrenheit and not more than 82 degrees Fahrenheit. Inspector Comments: Based on observation and interview, the facility failed to ensure the temperature in the home was between 68-82 degrees Fahrenheit (F), to ensure the	0181	Tag 0181 Health & Sanitation- Temperature 1. The one of two air conditioning units were not working at the facility 8/8/25. The owner contacted the landlord of the home. The order was placed for a new unit. However, a wrong part was ordered to connect the unit. On 8/15/25 the unit was successfully installed. (See receipt attached)	08/15/2025

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Name: JOANNE MISURACA Title: Administrator Date: 09/29/2025

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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	safety of the residents. Findings include: On 08/14/25, at 3 PM, the following temperatures were noted in the facility. There were two thermostats observed in the facility. The facility had two air conditioning (AC) units to cool two sections of the facility. One air conditioning unit was functional and the other was not. The first thermostat for the half of the facility containing the kitchen, three resident rooms and the lobby noted the temperature at 78 F, and the second thermostat noted the temperature noted on the other half of the facility containing two resident bedrooms as 86 degrees F. -Bedroom A, with one resident in the room had an actual temperature of 90 degrees F. -Bedroom B, with one resident in the room, had an actual temperature of 91 degrees F. -The living room/Common area, where two residents sat, had an actual temperature of 85 degrees F. Document review revealed a receipt dated 08/14/25, 1:51 PM, indicating the facility purchased a portable AC unit. On 08/14/25, at 3:00 PM, no portable AC units were observed in use yet. On 08/14/25, at 3:10 PM, the Administrator indicated the back end of the home did not have a functioning AC unit. The Administrator revealed the unit stopped working on 08/08/25 and confirmed the facility had not provided portable AC units or other equipment to cool the facility and the affected residents until 08/14/25. On 08/14/25, at 3:15 PM, a resident indicated the home had been without AC for about a week and their room was hot and uncomfortable. The resident indicated no alternative means of cooling the room had been provided. On 08/14/25, at 3:20 PM, multiple residents in the living room revealed the living room had been hot for a while and no AC units were present. On 08/14/25, at 3:15 PM, a resident indicated their room was really hot and uncomfortable. On 08/14/25, at 3:30 PM, multiple Caregivers confirmed the home had a broken AC unit, which had not worked since 08/08/25. The Caregivers		2. The temperature in the facility must be maintained at a level that is not less than 68 degrees Fahrenheit and not more than 82 degrees Fahrenheit. The staff will contact administrator or owner immediately if any temperature changes in facility occur. We will get service repair done so the deficient practice does not recur. 3. The corrective action will be monitored when the administrator visits the group home, inspection will be done on all bedrooms and common areas to ensure the temperature is comfortable for all residents. 4. The administrator will be responsible for ensuring the plan of correction is implemented. 5. Date of compliance: 8/15/25	

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	confirmed the home was hot and the affected resident rooms were currently 90 degrees F and the living room was 85 degrees. On 08/14/25, at multiple times in the afternoon, the portable AC units were sporadically inoperable because the facility's circuit breaker kept tripping. On 08/14/25 at 4:45 PM, the surveyor took a final temperature of the facility and it was 88 degrees, showing the portable air conditioning units were operating at minimal capacity, but attempting to cool the facility and the affected residents. On 08/14/25, at 4:50 PM, documentation by the facility was collected which indicated the facility would monitor the temperatures and the residents and move beds to rooms with working AC, if the portable AC units failed and/or the facility became hot overnight and did not cool to required temperatures. On 08/15/25 at 1:00 PM, a follow up complaint visit and resident well-check was conducted. None of the three affected residents had been moved to other non-affected rooms in the house. The facility thermostat was set to 71 degrees F, the current air temperature displayed on the thermostat was 83 degrees F. Measured temperatures at 1:00 PM on 08/15/25: Bedroom A temperature was 88 degrees F. There was a fan and portable AC unit running in the room. Both units were functional but were not cooling the room. One resident was in the room. Bedroom B temperature was 85 degrees F. There was a portable AC unit running in the room. The unit was functional but was not cooling the room. One resident was in the room. The living room temperature was 82.8 degrees F. There was a large fan running in the room. The fan was functional but was not cooling the room. There was a portable AC unit in the room, but it was not functional. There were two residents in the room. On 08/15/25 in the afternoon, a Caregiver confirmed the lack of cool air and the documented temperatures on the one side of the facility and the facility had been without AC since 08/08/25. The Caregiver			

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	confirmed the fans and portable AC units were on and running, but still not cooling the rooms. The Caregiver reported the three residents affected did not want to move from their rooms and this is why the facility had not followed through with the documented plan written by the facility on 08/14/25. On 08/15/25 in the afternoon, the Owner reported the AC had not been fixed since 08/08/25 due to a missing part for the unit and that as of 08/15/25, there would be a new AC unit installed. On 08/15/25 at 1:38 PM, there was a declaration of Immediate Jeopardy (IJ). The Owner was onsite and notified of the IJ declaration. On 08/15/25 at 2:30 PM, a resident in bedroom A, reported feeling warm in their room. There was a portable AC unit observed by the resident's bed, set to 66 degrees F, but the temperature measured 88 degrees F at the unit. There was also a big fan on the table, facing the resident, blowing hot air. The resident reported being asked to move to another room by staff on 08/15/25 in the morning. The resident was moved to another licensed facility on 08/15/25 at 3:30 PM. On 08/15/25 at 2:45 PM, a resident in bedroom B, reported not being hot, and the facility did offer drinks for hydration. The resident verbalized not wanting to move anywhere, not even to another room. On 08/15/25 at 3:00 PM, another resident in bedroom A was observed in the living room, with a fan blowing in their direction. The resident reported being asked to change rooms two hours prior, but indicated being okay where they were. When asked again later in the afternoon, the resident agreed to move and was moved with the other resident to another licensed facility on 08/15/25 at 3:30 PM. On 08/15/25 at 3:15 PM, a phone call was made with the management company coordinating the AC unit installation about the status of the AC unit. The response was the unit would be on site and installed by 9:00 PM on 08/15/25. On 08/15/25 at 3:20 PM the Owner confirmed the AC on one side of the			

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	house was not operating since 08/08/25 and the temperatures were hot and above required temperatures. On 08/15/25 at 3:40 PM, the AC technician arrived onsite with the new unit being placed on the roof for installation. On 08/15/25 at 3:45 PM, temperatures taken of the rooms documented bedroom B read 86 degrees F. Bedroom A read 89 degrees F. The living room read 84 degrees F. On 08/15/25 at 4:45 PM, the IJ was abated. The temperature the AC unit was blowing out was 74 degrees F and within required temperature range. An invoice dated 08/15/25, documented a 3-ton AC unit was installed. On 08/19/25 in the afternoon, the Administrator confirmed an AC unit was installed on 08/15/25, one week after the AC went down and became non-functional in the facility. Scope: 3 Severity: 2 Complaint #NV00074821			