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
	7722	A. BUILDING _____ B. WING _____	10/25/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EUROPEAN SENIORS LIVING, LLC	**3045 S. MONTE CRISTO WAY, LAS VEGAS, NEVADA ,89117**

(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 10/25/17. 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 ten Residential Facility for Group beds for elderly and disabled persons and/or persons with mental illnesses and chronic illnesses, Five category I and five Category II residents. The census at the time of the survey was six. Six resident files were reviewed and four 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: P. THERESA BRUSHFIELD	Title: ADMINISTRATOR	Date: 11/05/2017

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0936 SS= E	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 interview and record review, the facility failed to ensure 2 of 6 residents had an annual tuberculoses (TB) screening for 2016 (Resident #1 and #2). Findings include: Resident #1 Resident #1 was admitted to the facility on 11/13/15, with a diagnoses of cerebral vascular disease. The resident's medical record documented a two step TB screening was completed on 11/13/15 and 3/11/17. The resident's file lacked documented evidence of an annual TB screening for 2016. Resident #2 Resident #2 was admitted to the facility on 7/24/16, with a diagnoses of cerebral infarction and late on set Alzheimer's Disease. The resident's medical record documented a two step TB screening was completed on 2/18/14, 2/24/15 and 3/16/17. The resident's file lacked documented evidence of an annual TB screening for 2016. On 10/25/17 at 1:00 PM, the owner's family member reviewed the resident's files and acknowledged the resident did not have an annual TB screening for 2016. Severity: 2 Scope: 2	0936	1. Every January we will have every resident have an annual one-step TB test, even if they are admitted in the prior month of December. 2. The Administrator and House Manager will note their calendars to have the TB test and annual physicals completed in January. 3. The Administrator will enter into the computer the information as a reminder to follow through with the testing. 4. The Administrator is the person responsible for ensuring that this deficiency doesn't happen again.	11/05/2017