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 _____ | **08/15/2023** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| **BELLA VITA CARE HOME** | **9924 WONDERFUL DAY DRIVE, LAS VEGAS, NEVADA ,89148** |

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| 0000 | Initial Comments<br><br>Inspector Comments: This Statement of Deficiencies was generated as a result of a complaint investigation initiated on 07/03/23 and completed on 08/15/2023, in accordance with Nevada Administrative Code (NAC), Chapter 449, Residential Facilities for Groups. The census at the time of the survey was 10. The sample size was 3. The facility received a grade of A. There were two complaints investigated. Complaint #NV00068696 could not be verified. No regulatory deficiencies could be identified. Complaint #NV00068856 was verified with no regulatory deficiencies identified. An investigation into the complaints included: Observation of grooming and physical appearance for residents, meal service and a tour of the facility. Interviews were conducted with residents and Caregivers. Record Review of three resident records and four staff files. Document Review included resident care plans and incident reports. 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 regulatory deficiencies were identified: | 0000 | | |
| 0053 SS= D | Administrator's Responsibilities-Complete Rec - NAC 449.194 Responsibilities of administrator. (NRS 449.0302) The administrator of a residential facility shall: 4. Ensure that the records of the facility are complete and accurate.<br><br>Inspector Comments: Based on observation, interview, and document review, the Administrator failed to ensure 1 of 4 sampled employees had a completed personnel file at the facility (Employee #4). Findings include: Employee #4 (E4) E4 was hired on 04/09/23 and terminated | 0053 | We have developed a comprehensive employee checklist and partnered with other companies to streamline various onboarding process aspects for our employees.Here's a breakdown of the components:<br><br>1. **Employee Checklist:** This is a list of requirements that new employees must complete before or shortly after starting their | 08/30/2023 |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | Name: PATRICIA THERESA BRUSHFIELD | Title: Asst. to Administrator | Date: 08/30/2023

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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| | employment on 05/23/23 as a Caregiver. On 04/09/23, record review revealed E4's file was unavailable. On 07/21/23 at 2:54 PM, an email was sent to the Administrator requesting E4's file. The Administrator acknowledged the only documented evidence in E4's file was a Cardio Pulmonary Resuscitation card, a physical examination, and a tuberculosis test. There was no other documented evidence provided by the Administrator on 07/21/23 that E4's employee file contained the following: - Current and/or initial background checks, per the NAC 449.200 (1) (f). - Initial Alzheimer's training, per the NAC 449.2768 (1) (1-4). - Initial Elder Abuse training, per the NRS 449.093. - Initial Caregiver training, per the NAC 449.196 (1) (a-f) - Initial Cultural Competency training, per the RO16-20 Section 14, 15, 16, and 17. - Initial Medication Management training, per the NAC 449.196 (3) (a-d) As of 08/10/23 the Administrator did not provide evidence of background check and training requirement documentation for E4. Severity: 2 Scope: 1 This is a repeat citation from survey dated 05/17/23. | | employment. It helps ensure that all necessary steps are taken to integrate the new hires into the company smoothly and efficiently.<br><br>2. **Physical Examination:** Requiring a physical examination for new employees is a common practice, primarily because of the population we serve, where health and physical capabilities are essential.This step helps to ensure that employees are fit for the demands of their roles.<br><br>3. **Tuberculosis Training:** Given the contagious nature of tuberculosis (TB), especially in healthcare or close-contact settings, training employees about TB prevention, identification,and reporting is crucial for workplace safety and public health and that the new hire receives the testing before being allowed to work with are residents.<br><br>4. **Fingerprinting:** Fingerprinting will be processed at the same location where the employee has their physical and QuantiFERON testing, this business also is approved to do the required background checks. One-stop shop.<br><br>5. **Collings Learning:** This seems to be an online training platform that you're using to deliver various training courses to your employees. It's a convenient way | |

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| | | | to provide training content to your workforce, primarily if it covers specific topics like for caregivers. This might include training related to caregiving skills, regulations, and best practices.<br><br>6. **Memory Care Training:** This type of training is likely focused on providing care to individuals with memory-related disorders, such as dementia or Alzheimer's disease. Training employees in this area is crucial if your company deals with elderly or memory-impaired individuals. All staff are required to do approximately 13 hours of memory training.<br><br>7. **Nevada E-learn Website:** We use this official website for the state of Nevada that hosts e-learning courses related to various subjects, including regulatory requirements or industry-specific training.<br><br>8. **Flex-Ed:** Flex-Ed appears to be another online education platform that you're using for your training needs,specifically for Cultural Competency Training (CCT). Your approach of partnering with companies and utilizing online training resources showcases a well-rounded strategy to ensure that your employees are well-prepared and compliant with the necessary requirements. This approach also | |

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| | | | indicates that you value employee training, safety, and regulatory compliance. Keep in mind that the success of this strategy will depend on the quality of the training content, the ease of use of the platforms, and effective communication with your employees throughout the process.<br><br>9. **It is the Administrator responsible to oversee this deficiency** | |
| 0620 SS= F | Written Policy on Admissions - NAC 449.2702 Written policy on admissions; eligibility for residency. (NRS 449.0302) 4. Except as otherwise provided in NAC 449.275 and 449.2754, a residential facility shall not admit or allow to remain in the facility any person who: (a) Is bedfast; (b) Requires restraint; (c) Requires confinement in locked quarters; or (d) Requires skilled nursing or other medical supervision on a 24-hour basis.<br><br>Inspector Comments: Based on observation, interview and record review, the facility failed to ensure 2 of 3 sampled residents (Resident #2 and Resident #3) who were bedfast, had an approved bedfast waiver. Findings include: Resident #2 (R2) R2 was admitted on 05/17/23 with diagnoses including dementia. On 07/03/23 in the morning, R2 was lying in bed, eyes closed and could not speak. R2 was unable to respond to verbal commands and unable to reposition themselves in the bed without assistance. On 07/03/23 in the morning, a Caregiver indicated R2 received hospice services, was completely dependent for all care, and was bedfast. R2's medical record | 0620 | Resident #2 died on July 27, 2023 and the bedfast waiver was not renewed.<br><br>Resident #3 received his waiver on August 2, 2023 Renewing a bedfast waiver annually involves a combination of proper documentation and reminders to ensure the process is carried out smoothly.<br><br>1. **Documentation:**<br><br>•□□□□□□□**Create a Renewal Checklist:** Develop a checklist that outlines all | 07/10/2023 |

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| | lacked documented evidence R7 had an approved bedfast waiver or had submitted an application for a bedfast waiver from the Bureau. Resident #3 (R3) R3 was admitted on 04/12/21 with diagnoses including Dementia. On 07/03/23 in the morning, R3 was lying in bed, eyes closed and could not speak. R3 was unable to respond to verbal commands and unable to reposition themselves in the bed without assistance. On 07/03/23 in the morning, a Caregiver indicated R3 received hospice services, was completely dependant for all care, and was bedfast. R3's medical record revealed an approved bedfast waiver dated 09/01/21. The approved bedfast waiver indicated it needed to be renewed every year. R3's medical record lacked documented evidence R3 had a renewed bedfast waiver. On 05/23/23 in the morning, a Caregiver acknowledged R2 and R3 were bedfast and R2's and R3's medical records lacked documented evidence the facility had an approved bedfast waiver or had submitted an application for a bedfast waiver from the Bureau. Severity: 2 Scope: 3 | | the steps necessary for renewing the bedfast waiver. Include items such as gathering necessary paperwork, completing forms, and coordinating with relevant parties.<br><br>•□□□□□□□□**Collect Required Information:** Ensure you have all the required information for the renewal process, such as the patient's details,medical history, and any changes in their condition over the past year.<br><br>•□□□□□□□□**Forms and Paperwork:** Prepare the necessary forms and paperwork for the renewal. This may involve updating medical records,doctor's assessments, and any other relevant documentation.<br><br>2. **Notification:**<br><br>•□□□□□□□□**Set Reminders:** We | |

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| | | | will use digital tools like calendars, task management apps, or electronic medical record (EMR)systems to set reminders for key dates related to the bedfast waiver renewal process.<br>•□□□□□□□□**Advance Notice:** Set reminders well before the renewal deadline to allow ample time for gathering documents and completing necessary tasks.<br>•□□□□□□□□**Automated Alerts:** Our facility uses an EMR or administrative software; consider setting up automated alerts for renewal deadlines and tasks.<br>•□□□□□□□□**Multiple Reminders:** Set multiple reminders at different intervals leading up to the deadline to ensure that no steps are missed.<br>3. **Communication:** | |

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| | | | • □□□□□□□□**Internal Communication:** We work as a staff, to ensure that all relevant staff members know the upcoming renewal and their responsibilities.<br>• □□□□□□□□**Patient/Family Communication:** If applicable, inform the patient and their family about the upcoming renewal and provide them with any necessary information or assistance.<br>4. **Documentation of the Renewal:**<br>• □□□□□□□□**RecordKeeping:** Maintain a dedicated section in the patient's medical record for documenting the bedfast waiver renewal process. This will include copies of all forms, assessments, and communications related to the renewal.<br>• □□□□□□□□**Date and** | |

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| | | | **Signatures:** Ensure all documents are dated and appropriately signed by authorized individuals involved in the renewal process.<br><br>5. **Review and Evaluation:**<br><br>•□□□□□□□**Post-Renewal Evaluation:** After the renewal is complete, take some time to review the process. Are there any improvements that can be made for the next renewal cycle? Are there any lessons learned from this renewal that could benefit future renewals?<br><br>6. **Administrator:**<br><br>•□□□□□□□**Itis the Administrator responsible to oversee this deficiency**.<br><br>By following this approach, you can establish a systematic and organized process for renewing bedfast waivers annually,ensuring that no crucial steps are | |

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| | | | overlooked and that residents receive the care they need. Always adhere to regulations and the policy and guidelines specific to our facility licensing | |