

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 6/15/2026
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/12/2024
NAME OF PROVIDER OR SUPPLIER GRAND MONTECITO MEMORY CARE			STREET ADDRESS, CITY, STATE, ZIP CODE 6660 GRAND MONTECITO PARKWAY, LAS VEGAS, NEVADA ,89149	
(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 02/12/2024, in accordance with Nevada Administrative Code (NAC), Chapter 449, Residential Facilities for Groups. The census at the time of the survey was 38. The sample size was 5. The facility received a grade of A. There was one complaint investigated. Unverified: Complaint #NV00070163 could not be verified. No regulatory deficiencies could be identified. The investigation of the complaint included: Observation of grooming and physical appearance for resident, staff and resident interactions, and a tour of the facility. Interviews were conducted with Caregivers, a Medication Technician, and the Administrator. Clinical Record Review of five records. Document Review included facility policy and procedures, incident reports, and care plans. 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. There following deficiencies were identified:	0000		
0074 SS= F	Elder Abuse Training - NRS 449.093 Training to recognize and prevent abuse of older persons: Persons required to receive; frequency; topics; costs; actions for failure to complete. 1. An applicant for a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before a license to operate such a facility, agency or home is issued to the applicant. If an applicant has completed	0074	Annual Elder Abuse training for employees #1, and #2 were completed on 03/07/2024. Employee #3 is no longer employed by Grand Montecito. All other Employee files are being reviewed by Administrator and/or Designee and will ensure annual Elder Abuse Training is completed for all employees by 3/30/2024. An Employee Tickler has been created and the Business Office Manager or Designee will monitor Employee files to ensure compliance.	03/07/2024

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER Name: MARJOLIYN KIRBY
REPRESENTATIVE'S SIGNATURE

Title: Administrator

Date: 03/08/2024

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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	such training within the year preceding the date of the application for a license and the application includes evidence of the training, the applicant shall be deemed to have complied with the requirements of this subsection. 2. A licensee who holds a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must annually receive training to recognize and prevent the abuse of older persons before the license to operate such a facility, agency or home may be renewed. 3. If an applicant or licensee who is required by this section to obtain training is not a natural person, the person in charge of the facility, agency or home must receive the training required by this section. 4. An administrator or other person in charge of a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before the facility, agency or home provides care to a person and annually thereafter. 5. An employee who will provide care to a person in a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care must receive training to recognize and prevent the abuse of older persons before the employee provides care to a person in the facility, agency or home and annually thereafter. 6. The topics of instruction that must be included in the training required by this section must include, without limitation: (a) Recognizing the abuse of older persons, including sexual abuse and violations of NRS 200.5091 to 200.50995, inclusive; (b) Responding to						

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	reports of the alleged abuse of older persons, including sexual abuse and violations of NRS 200.5091 to 200.50995, inclusive; and (c) Instruction concerning the federal, state and local laws, and any changes to those laws, relating to: (1) The abuse of older persons; and (2) Facilities for intermediate care, facilities for skilled nursing, agencies to provide personal care services in the home, facilities for the care of adults during the day, residential facilities for groups or homes for individual residential care, as applicable for the person receiving the training. 7. The facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care is responsible for the costs related to the training required by this section. 8. The administrator of a facility for intermediate care, facility for skilled nursing or residential facility for groups who is licensed pursuant to chapter 654 of NRS shall ensure that each employee of the facility who provides care to residents has obtained the training required by this section. If an administrator or employee of a facility or home does not obtain the training required by this section, the Division shall notify the Board of Examiners for Long-Term Care Administrators that the administrator is in violation of this section. 9. The holder of a license to operate a facility for intermediate care, facility for skilled nursing, agency to provide personal care services in the home, facility for the care of adults during the day, residential facility for groups or home for individual residential care shall ensure that each person who is required to comply with the requirements for training pursuant to this section complies with such requirements. The Division may, for any violation of this section, take disciplinary action against a facility, agency or home pursuant to NRS 449.160 and 449.163.						

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	Inspector Comments: Based on interview and document review, the facility failed to ensure training in the identification and prevention of elder abuse was completed for 3 of 5 sampled employees (Employee #1, #2, and #3). Findings include: Employee #1 (E1) E1 was hired on 10/01/22 as a Caregiver. E1's employee file revealed a training certificate for Elder Abuse Training dated as completed on 01/31/22. There was no evidence in E1's file of current annual Elder Abuse Training. Employee #2 (E2) E2 was hired on 06/24/22 as a Caregiver. E2's employee file revealed a training certificate for Elder Abuse Training dated as completed on 01/31/22. There was no evidence in E2's file of current annual Elder Abuse Training. Employee #3 (E3) E3 was hired on 08/05/21 as a Medication Technician. E3's employee file revealed a training certificate for Elder Abuse Training dated as completed on 01/31/22. There was no evidence in E3's file of current annual Elder Abuse Training. On 02/12/24 in the morning, the Administrator acknowledged E1, E2 and E3's employee file lacked evidence of current annual Elder Abuse Training Severity: 2 Scope: 3			
1037 SS= F	Care to Persons with Dementia - NAC 449.2768 and R043-22 Residential facility which provides care to persons with dementia: Training for employees. (NRS 449.0302, 449.094) 1. Except as otherwise provided in subsection 2, the administrator of a residential facility which provides care to persons with any form of dementia shall ensure that: (a) Each employee of the facility who has direct contact with and provides care to residents with any form of dementia, including, without limitation, dementia caused by Alzheimer ' s disease, successfully completes: (3) If such an employee is licensed or certified by an occupational licensing board, at least 3 hours of continuing education in providing care to a resident with dementia, which must be completed on or before the anniversary date of the first date the	1037	Annual Dementia training for employees #1, and #2 were completed on 03/07/2024. Employee #3 is no longer employed by Grand Montecito. All other Employee files are being reviewed by Administrator and/or Designee and will ensure annual Dementia Training is completed for all employees by 3/30/2024. An Employee Tickler has been created and the Business Office Manager or Designee will monitor Employee files to ensure compliance.	03/07/2024 4

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	employee was initially employed at the facility. The requirements set forth in this subparagraph are in addition to those set forth in subparagraphs (1) and (2), may be used to satisfy any continuing education requirements of an occupational licensing board, and do not constitute additional hours or units of continuing education required by the occupational licensing board. (4) If such an employee is a caregiver, other than a caregiver described in subparagraph (3), at least 3 hours of tier 2 training in providing care to a resident with dementia, which must be completed on or before the anniversary date of the first date the employee was initially employed at the facility. The requirements set forth in this subparagraph are in addition to those set forth in subparagraphs (1) and (2). Inspector Comments: Based on record review and interview, the facility failed to ensure three hours of annual Alzheimer's training was completed by 3 of 5 employees (Employee #1, #2, and #3). Findings include: Employee #1 (E1) E1 was hired on 10/01/22 as a Caregiver. E1's file lacked documented evidence of three hours of annual Alzheimer's training. E1's employee file documented E1 last completed Alzheimer's training on 10/20/22. Employee #2 (E2) E2 was hired on 06/24/22 as a Caregiver. E2's file lacked documented evidence of three hours of annual Alzheimer's training. E2's employee file documented E2 last completed Alzheimer's training on 06/24/22. Employee #3 (E3) E3 was hired on 08/05/21 as a Medication Technician. E3's file lacked documented evidence of three hours of annual Alzheimer's training. E3's employee file documented E3 last completed Alzheimer's training on 12/30/22. On 02/12/24 in the morning, the Administrator acknowledged E1, E2 and E3's employee file lacked evidence of three hours of annual Alzheimer's training. Severity: 2 Scope: 3						