STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	9431	A. BUILDING _____ B. WING _____	08/24/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOLDEN YEARS CASTLE HOME OF FERNLEY	575 FARM DISTRICT ROAD, FERNLEY, NEVADA ,89408

(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 08/24/21. This State Licensure survey was conducted by the Division of Public and Behavioral Health in accordance with NAC 449, Residential Facility for Groups. The facility is licensed for sixteen Residential Facility for Group beds for elderly and disabled persons and/or persons with Alzheimer's disease, Category II. The census at the time of the survey was 16. Ten resident files were reviewed and five employee files were reviewed. The facility received a grade of B. 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		
0170 SS= I	Health And Sanitation-Safe Water & Sewage - NAC 449.209 Health and sanitation. (NRS 449.0302) 1. A residential facility must: (a) Have a safe and sufficient supply of water, adequate drainage and an adequate system for the disposal of sewage. Inspector Comments: Based on observation and interview, the facility failed to ensure bathroom water temperatures were at a safe level for residents with Alzheimer's, dementia and/or a cognitive impairment. This deficient practice had the potential to affect 16 of 16 residents, their visitors and other occupants of the facility. Findings include: On 08/24/21, water temperatures in various bathrooms were measured with a State issued thermometer. Below are the temperatures which measured greater than 100 degrees Fahrenheit (safe for bathing): On 08/24/21 at 9:25 AM, in the common bathroom, the handwashing sink's faucet water measured 148 degrees Fahrenheit. On 08/24/21 at 9:25 AM, the Housekeeper confirmed the water temperature. On 08/24/21 at 10:34 AM, in Room #12's	0170		10/28/2021

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	bathroom, the handwashing sink's faucet water measured 117 degrees Fahrenheit. On 08/24/21 at 10:34 AM, the House Manager/Caregiver confirmed the water temperature. On 08/24/21 at 10:34 AM, in Room #9's bathroom, the handwashing sink's faucet water measured 140 degrees Fahrenheit. On 08/24/21 at 10:34 AM, the House Manager/Caregiver confirmed the water temperature. On 08/24/21 at 10:39 AM, Resident #11 verbalized the water gets too hot in the bathroom attached to the resident's room. On 08/24/21 from approximately 9:30 AM through approximately 10:45 AM, the additional 15 residents were approached; however, all 15 residents were unable to be interviewed due to their diagnoses. On 08/24/21 at exit, the Administrator verbalized the hot water heaters were at the lowest setting. On 08/27/21 at 1:58 PM, the Administrator verbalized, via telephone, a new hot water tank was purchased the previous winter and the dial was set to the lowest setting. However, the Administrator confirmed the water being discharged from the various locations throughout the facility was too high and the hot water tank(s) needed to be serviced by a vendor. The Administrator further communicated none of the residents received burns from the hand washing sinks nor showers/baths, as this water temperature was not appropriate in a home for persons with Alzheimer's. Note: Time and temperature relationship to third degree burn to occur: 155 degrees Fahrenheit 1 second 148 degrees Fahrenheit 2 seconds 140 degrees Fahrenheit 5 seconds 133 degrees Fahrenheit 15 seconds 127 degrees Fahrenheit 1 minute 124 degrees Fahrenheit 3 minute 120 degrees Fahrenheit 5 minutes 100 degrees Fahrenheit Safe for bathing Severity: 3 Scope: 3			
0620 SS= D	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	0620		10/03/2021

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	confinement in locked quarters; or (d) Requires skilled nursing or other medical supervision on a 24-hour basis. Inspector Comments: Based on observation, interview and document review, the facility failed to ensure a resident did not remain in the facility after becoming bedfast for 1 of 16 residents (Resident #1). Findings include: Resident #1 was admitted to the facility on 04/10/18 with a diagnosis of cerebral atherosclerosis, vascular dementia, Alzheimer's disease, and chronic kidney disease, severe protein calorie malnutrition. The resident began receiving hospice services on 01/29/21. The resident's medical record lacked documented evidence a bedfast exemption was submitted to and approved by the Bureau. A hospice Client Coordination Notes Report, dated 02/04/21, documented Resident #1 was bedbound and the resident was able to move only facial muscles, eyes, and mouth. Resident #1 was sitting in high fowler position in a hospital bed, tilted to the right and positioned with the pillows as Resident #1 did not maintain position in the vertical plane on her own without assistance. Resident #1 had dysphagia with high risk of aspiration. Resident #1 is only consumed a pureed diet and needed assistance with feeding. On 08/24/21 at 12:30 PM, the House Manager/Caregiver confirmed Resident #1's record lacked documented evidence of an approved waiver for admission of a bedfast resident from the Bureau. On 08/24/21 at 10:55 AM, Resident #1 was in bed laying on their left side. The House Manager/Caregiver verbalized the resident was bedbound. On 08/24/21 at 11:14 AM, the House Manager/Caregiver confirmed Resident #1's record lacked documented evidence of an approved waiver for admission of a bedfast resident from the Bureau. Severity: 2 Scope: 1			

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0999 SS= D	Alzheimer 's Care Standards for Safety - NAC 449.2756 Residential facility which provides care to persons with Alzheimer ' s disease: Standards for safety; personnel required; training for employees. (NRS 449.0302) 1. The administrator of a residential facility which provides care to persons with Alzheimer ' s disease shall ensure that: (g) All toxic substances are not accessible to the residents of the facility. Inspector Comments: Based on observation and interview, the facility failed to ensure toxic substances were inaccessible to residents living in a secured facility. Findings include: On 08/24/20, the following toxic substances were identified as unsecured: - At 10:30 AM, Bedroom #1's bathroom contained unsecured adult toothpaste. - At 9:40 AM, Bedroom #10's bedroom and bathroom contained the following unsecured items: - Dove Bodywash - Soothe and Cool Cleanser shampoo and body wash - Onyx Professional nail polish remover - Body scrub - Vaseline - Pump antiperspirant - Hair conditioner - Body lotion - Foundation makeup - At 10:01 AM, Bedroom #12's bedroom contained deodorant in an unlocked nightstand drawer. On 08/24/21 at 10:30 AM, the House Manager/Caregiver verbalized the above items should be secured. Severity: 2 Scope: 1	0999		10/03/2021