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
	9793	A. BUILDING _____ B. WING _____	06/24/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
A BENEVOLENT HEART CARE HOME	**508 PEARBERRY AVENUE, LAS VEGAS, NEVADA ,89123**

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0000	Initial Comments Inspector Comments: This Statement of Deficiencies was generated as a result of an annual State Licensure survey completed at your facility on 06/24/24 in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for nine Residential Facility for Group beds for elderly and disabled persons and/or persons with Alzheimer's disease, Category II residents. The census at the time of the survey was seven. Seven resident files and five 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 regulatory deficiencies were identified:	0000		

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0065 SS= D	Qualifications of Caregivers-Age-Eng-Training - NAC 449.196 and LCB File No. R043-22 Qualifications and training of caregivers. (NRS 449.0302) 1. A caregiver of a residential facility must: (a) Be at least 18 years of age; (b) Be responsible and mature and have the personal qualities which will enable him or her to understand the problems of elderly persons and persons with disabilities; (c) Understand the provisions of NAC 449.156 to 449.27706, inclusive, and sections 2 to 16 inclusive of this regulation and sign a statement that he or she has read those provisions; (d) Demonstrate the ability to read, write, speak and understand the English language; (e) Possess the appropriate knowledge, skills and abilities to meet the needs of the residents of the facility; and (f) Not later than 60 days after commencing employment with the residential facility, receive not less than 4 hours of a combination of tier 1 and tier 2 training related to care for the residents of the facility; and (g) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility. Such training must include, without limitation, at least 2 hours of tier 2 training. Inspector Comments: Based on record review and interview, the facility failed to ensure initial caregiver training was completed for 1 of 5 employees (Employee #5). Findings include: Employee #5 (E5) E5 was hired on 04/01/24 as the Administrator. E5's file lacked documented evidence of 4 hours of initial caregiver training within the first 60 days of hire. On 04/01/24 in the afternoon, the Administrator acknowledged the lack of evidence of caregiver training in E5's file. Severity: 2 Scope: 1	0065	1. On 7/19/24 Certificate of Training in Caregiving Basics for E5 was obtained and placed in E5 folder. 2. A checklist was created to remind all employees when their CPR , Fingerprints, MAR , TB tests and Trainings are due and to place them in their folders immediately to minimize this deficiency in the future. 3. Administrator, Owner and Lead Caregiver will closely monitor this checklist to ensure all employee requirements are up to date. 4. Administrator is responsible for ensuring the plan of correction is implemented. 5. On 7/19/24. 6. Please see attached documents.	07/19/2024
0074 SS= D	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,	0074	1. On 7/21/24 Certificate of Training in Elder Abuse Training was obtained by E1 from the DHHS website and placed in E1 folder. 2. A checklist was created to remind all employees when their CPR , Fingerprints, MAR , TB tests and Trainings are due and to place them in their folders immediately to minimize this deficiency in the future. 3. Administrator, Owner and Lead	07/21/2024

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	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 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		Caregiver will closely monitor this checklist to ensure all employee requirements are up to date. 4. Administrator is responsible for ensuring the plan of correction is implemented. 5. On 7/21/24. 6. Please see attached documents.	

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	200.50995, inclusive; (b) Responding to 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. Inspector Comments: Based on record review and interview, the facility failed to ensure 1 of 5 employees completed annual training to recognize and prevent the abuse			

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	of elderly persons (Employee #2). Findings include: Employee #2 (E2) E2 was hired on 03/27/20 as a Caregiver. E2's last abuse and neglect training was dated 04/06/23. E2's file lacked documented evidence of annual abuse and neglect training. On 06/24/24 in the afternoon, the Administrator and the Owner acknowledged E2 had not completed the required annual abuse and neglect training. Severity: 2 Scope: 1			
0106 SS= D	Personnel File - 1st Aid & CPR - NAC 449.200 Personnel files 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1: (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation; Inspector Comments: Based on record review and interview, the facility failed to ensure 1 of 5 employees received cardiopulmonary resuscitation (CPR) and first aid training which included in-person training (Employee #2). Findings include: Employee #2 (E2) E2 was hired on 03/27/20 as a Caregiver. E2 completed CPR and first aid training provided by an online company on 04/15/24. The training did not contain an in-person component, a requirement per the regulation. On 06/24/24 in the afternoon, the Administrator acknowledged the CPR and first aid training completed by E2 did not contain an in-person component, and the employee should have completed training as required by the regulation. Severity: 2 Scope: 1	0106	1. On 7/09/24, a Certificate of Completion in Adult First Aid /CPR was obtained by E1 from American Red Cross and placed in E1 folder. 2. Administrator will require all employees to make sure when obtaining their CPR Certificates that they performed in person first aid and cardiopulmonary resuscitation. 3. Administrator, Owner and Lead Caregiver will closely monitor that the employee performed in person first aid and cardiopulmonary resuscitation when they obtained their CPR Certificate of Training. 4. Administrator is responsible for ensuring the plan of correction is implemented. 5. On 7/09/24. 6. Please see attached documents.	07/20/2024

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0830 SS= D	Exemption Requests - NAC 449.2736 Procedure to exempt certain residents from restrictions. (NRS 449.0302) 1. The administrator of a residential facility may submit to the Division a written request for permission to admit or retain a resident who is prohibited from being admitted to a residential facility or remaining as a resident of the facility pursuant to NAC 449.271 to 449.2734, inclusive. Inspector Comments: Based on observation, record review, and interview, the facility failed to ensure a medical exemption request was submitted to the Bureau to retain 1 of 7 bedfast residents (Resident #6). Findings include: Resident #6 (R6) R6 was admitted on 04/10/21 with a diagnosis of Alzheimer's Disease. On 06/24/24 in the morning, R6 was observed in their bed with the half-rails up on both sides. The Caregiver confirmed that R6 was not mobile and could not roll or change position in bed. Additionally, R6 could not hold either half rail. R6's file contained a bedfast medical exemption dated 09/26/22. The Owner explained they had requested the plan of care from R6's hospice company to include in the application for a bedfast medical exemption for R6, but had not received it. On 07/18/24 in the morning, the Bureau's list of bedfast medical exemption applications revealed lack of evidence the facility applied for a medical exemption for R6. Severity: 2 Scope: 1	0830	1. On 7/30/24 Administrator applied for and submitted documents applying for a Bedfast Exemption on DPBH website. 2. Administrator ,Owner and Lead Caregiver will have better communication when a resident becomes bedfast so that Administrator can apply for a Bedfast Exemption. 3. Administrator ,Owner and Lead Caregiver will have better communication when a resident's medical condition changes that requires a medical exemption so that Administrator can apply for a Medical Exemption. 4. Administrator is responsible for ensuring that the plan of correction is implemented. 5. On 7/30/24, a Bedfast Waiver was applied for. 6. Please see attached documents.	07/30/2024

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1035 SS= D	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 holds an endorsement as a residential facility which provides care to persons with Alzheimer ' s disease or other forms of dementia pursuant to NAC 449.2754 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 in addition to the training required by NAC 449.196: (1) Within the first 40 hours that such an employee works at the facility after he or she is initially employed at the facility, at least 2 hours of tier 2 training . Inspector Comments: Based on record review and interview, the facility failed to ensure 1 of 5 employees received two hours of initial Alzheimer's/dementia training within the first 40 hours of employment and an additional 8 hours of Alzheimer's dementia training within 3 months of employment (Employee #5). Findings include: Employee #5 (E5) E5 was hired on 04/01/24 as the Administrator. E5's file lacked documented evidence E5 received two hours of initial Alzheimer's/dementia training within the first 40 hours of employment and an additional 8 hours of Alzheimer's dementia training within the first 3 months of employment. On 04/01/24 in the afternoon, the Administrator acknowledged the file did not contain documented evidence of initial Alzheimer's/dementia training, per the requirements. Severity: 2 Scope: 1	1035	1. On 7/20/24 Certificate of Training in 'Alzheimer's Disease or other forms of Dementia" for E5 was obtained and placed in E5 folder. 2. A checklist was created to remind all employees when their CPR , Fingerprints, MAR , TB tests and Trainings are due and to place them in their folders immediately to minimize this deficiency in the future. 3. Administrator, Owner and Lead Caregiver will closely monitor this checklist to ensure all employee requirements are up to date. 4. Administrator is responsible for ensuring the plan of correction is implemented. 5. On 7/20/24. 6. Please see attached documents.	07/20/2024