

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS108AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/25/2009
NAME OF PROVIDER OR SUPPLIER CHARLESTON RES. CARE HOTEL		STREET ADDRESS, CITY, STATE, ZIP CODE 2121 W CHARLESTON BLVD LAS VEGAS, NV 89102		
(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) COMPLETE DATE
Y 000	Initial Comments The findings and conclusions of any investigation by the Health Division 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. This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 3/25/09. The facility received an annual survey grade of B. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for 129 Residential Facility for Group beds for elderly and disabled person and/or persons with mental illness. The census at the time of the survey was 128. Twenty-six resident files were reviewed and 11 employee files were reviewed. One discharged resident file was reviewed. The following deficiencies were identified:	Y 000		
Y 178 SS=D	449.209(5) Health and Sanitation-Maintain Int/Ext NAC 449.209 5. The administrator of a residential facility shall ensure that the premises are clean and that the interior, exterior and landscaping of the facility are well maintained. This Regulation is not met as evidenced by: Based on observation, interview and record review on 3/25/09, the facility failed to ensure	Y 178		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 178	Continued From page 1 damage to the ceilings in 11 of 66 resident rooms were repaired after leaks in the facility's roof were repaired (Resident room #208, #211, #212, #213, #216, #217, #218, #223, #227, #228 and #229). Severity: 2 Scope: 1	Y 178		
Y 223 SS=F	449.213(3) Laundry-Linen - Equipment, Venting NAC 449.213 3. The laundry room in a residential facility must be situated in an area which is separate from an area where food is stored, prepared or served. The laundry must be adequate in size for the needs of the facility and maintained in a sanitary manner. The laundry room must contain at least one washer and at least one dryer. All the equipment must be kept in good repair. All dryers must be ventilated to outside the building. If a washer or dryer is located outside the residential facility, the washer or dryer must be in a room or enclosure. This Regulation is not met as evidenced by: Based on observation and interviews on 3/25/09, 2 of 2 washing machines in the laundry area used by staff and residents did not function properly on a consistent basis, the ceiling exhaust fan was unplugged and did not work, and a door to a storage cabinet located over the dryer was detached from the cabinet and stored with half the door protruding off the top of the cabinet. Severity: 2 Scope: 3	Y 223		

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Y 255	Continued From page 2	Y 255		
Y 255 SS=F	<p>449.217(6)(a)(b) Permits - Comply with NAC 446</p> <p>NAC 449.217 6. A residential facility with more than 10 residents must: (a) Comply with the standards prescribed in chapter 446 of NAC. (b) Obtain the necessary permits from the Bureau of Health Protection Services of the Division.</p> <p>This Regulation is not met as evidenced by: Based on observation and interview on 3/25/09, the facility failed to ensure: -potentially hazardous foods were stored at 40 degrees Farenheit (F) or less in the cook's reach-in refrigerator; - raw eggs were stored below the milk in the walk-in refrigerator, un-washed raw vegetables were stored below containers of soup and food products were not store in the dishroom to prevent cross-contamination; - the door gaskets on the walk-in refrigerator, the walk-in freezer and the reach-in refrigerator on the cooks line were in good condition; - the metal racks in the cook's line reach-in refrigerator were not rusted; - the kitchen floors were clean especially under and behind equipment, and there was not an accumulation of refuse behind the ice machine; - the can opener and the juice gun were clean;</p>	Y 255		

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Y 255	Continued From page 3 - worn cutting boards with rough surfaces were replaced as they can not be cleaned properly; - an open case of styrofoam cups were stored off the floor on approved racks; - tile floors on the cook's line and the dishroom were not damaged; - the floor and walls in the mop room were kept in good repair; - there were no base cove tiles missing on the wall below the reach-in pass-through doors; and - the garbage cans and lids in the kitchen were kept clean. Severity: 2 Scope: 3	Y 255		
Y 936 SS=B	449.2749(1)(e) Resident file NAC 449.2749 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. This Regulation is not met as evidenced by: Based on record review on 3/25/09, the facility failed to ensure the read date of tuberculosis (TB) tests on 11 of 26 residents were record in compliance with NAC 441A.380 (Resident #1, #6, #8, #11, #12, #13, #19, #20, #21, #24 and #25). Severity: 1 Scope: 2	Y 936		

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