

Bureau of Health Care Quality and Compliance

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                                  |  | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>NVS19ADA</b>                         | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br>B. WING _____  | (X3) DATE SURVEY COMPLETED<br><br><b>08/19/2010</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>WESTCARE NEVADA, INC. - HARRIS SPRINGS</b> |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>MAILING-5659 DUNCAN DRIVE<br/>LAS VEGAS, NV 89130</b> |   |   |
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| D 000   | Initial Comment<br><br>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.<br><br>This Statement of Deficiencies was generated as a result of the State Licensure survey conducted at your facility on 8/19/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.<br><br>The facility is licensed for 56 residential program beds for the treatment of abuse of alcohol and drugs. The census at the time of the survey was 50. Fifteen resident files and ten employee files were reviewed. One discharged resident file was reviewed.<br><br>The following deficiencies were identified: | D 000   |   |   |
| D 100   | NAC 449.117 Physical Examinations<br><br>All persons employed in a facility must have documentation showing that they are in compliance with any applicable provisions of chapter 441A of NAC concerning tuberculosis.<br><br>This Regulation is not met as evidenced by:<br>NAC 441A.375 Medical facilities, facilities for the dependent and homes for individual residential care: Management of cases and suspected cases; surveillance and testing of employees; counseling and preventive treatment. (NRS 441A.120)<br>1. A case having tuberculosis or suspected case   | D 100   |   |   |

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TITLE

(X6) DATE

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

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| D 100   | Continued From page 1<br><br>considered to have tuberculosis in a medical facility or a facility for the dependent must be managed in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.<br>2. A medical facility, a facility for the dependent or a home for individual residential care shall maintain surveillance of employees of the facility or home for tuberculosis and tuberculosis infection. The surveillance of employees must be conducted in accordance with the recommendations of the Centers for Disease Control and Prevention for preventing the transmission of tuberculosis in facilities providing health care set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.<br>3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a:<br>a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and<br>b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination.<br>If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his | D 100   |   |   |

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| D 100   | Continued From page 2<br><br>designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.<br>4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.<br>5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis.<br>6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.<br>7. A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis. (Added to NAC by Bd. of Health, eff. 1-24-92; A by R084-06, 7-14-2006)<br><br>Based on record review on 8/19/10, the facility failed to ensure that 2 of 10 employees met the | D 100   |   |   |

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| D 100              | Continued From page 3<br><br>requirements of NAC 441A.375 concerning tuberculosis (TB) (Employee #2 and Employee #10). The facility failed to ensure 1 of 10 employees met the requirements of a pre-employment physical examination (Resident #6).<br><br>Severity: 2 Scope: 1  | D 100         |   |                    |
| D 132              | NAC 449.129(3) Construction Standards<br><br>3. Facilities housing 17 or more clients must meet the requirements of the chapter entitled " New Hotels and Dormitories, " of the edition of NFPA 101: Life Safety Code, adopted by reference pursuant to NAC 449.0105. Those facilities housing not more than 16 clients must meet the requirements of the chapter entitled " Lodging or Rooming Houses, " of the edition of NFPA 101: Life Safety Code, adopted by reference pursuant to NAC 449.0105.<br><br>This Regulation is not met as evidenced by: Based on observation on 8/19/10, the facility failed to maintain a smoke detector in 1 of 6 cabins (Youth cabin, Room #1). Emergency lights were non functional in the computer room and 1 of 2 were non functional in the office.<br><br>Severity: 2 Scope: 1 | D 132         |   |                    |

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| D 160   | Continued From page 4  | D 160   |   |   |
| D 160   | NAC 449.135(1) Safety from fire<br><br>1. Portable fire extinguishers must be installed throughout each facility at the direction of the fire authority having jurisdiction. Each portable fire extinguisher available at a facility must be inspected, recharged and tagged at least once each year by a person certified by the State Fire Marshal to conduct such inspections.<br><br>This Regulation is not met as evidenced by: Based on observation on 8/19/10, the facility failed to ensure 1 of 6 fire extinguishers in the cabins were annually inspected or recharged ( Fire Extinguisher in Cabin #2, the gauge was indicating it was discharged. The inspection tag on the fire extinguisher in cabin #4 lacked the year it was inspected).<br><br>Severity: 2 Scope: 2 | D 160   |   |   |
| D 216   | NAC 449.141(8) Health Services<br><br>8. Clients of residential programs must undergo a tuberculin skin test that meets the requirements specified in chapter 441A of NAC.<br><br>This Regulation is not met as evidenced by: NAC 441A.380 Admission of persons to certain medical facilities, facilities for the dependent or homes for individual residential care: Testing; respiratory isolation; medical treatment;   | D 216   |   |   |

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| D 216   | Continued From page 5<br><br>counseling and preventive treatment; documentation. (NRS 441A.120).<br>1. Except as otherwise provided in this section, before admitting a person to a medical facility for extended care, skilled nursing or intermediate care, the staff of the facility shall ensure that a chest radiograph of the person has been taken within 30 days preceding admission to the facility.<br>2. Except as otherwise provided in this section, the staff of a facility for the dependent, a home for individual residential care or a medical facility for extended care, skilled nursing or intermediate care shall:<br>(a) Before admitting a person to the facility or home, determine if the person:<br>(1) Has had a cough for more than 3 weeks;<br>(2) Has a cough which is productive;<br>(3) Has blood in his sputum;<br>(4) Has a fever which is not associated with a cold, flu or other apparent illness;<br>(5) Is experiencing night sweats;<br>(6) Is experiencing unexplained weight loss; or<br>(7) Has been in close contact with a person who has active tuberculosis.<br>(b) Within 24 hours after a person, including a person with a history of bacillus Calmette-Guerin (BCG) vaccination, is admitted to the facility or home, ensure that the person has a tuberculosis screening test, unless there is not a person qualified to administer the test in the facility or home when the patient is admitted. If there is not a person qualified to administer the test in the facility or home when the person is admitted, the staff of the facility or home shall ensure that the test is performed within 24 hours after a qualified person arrives at the facility or home or within 5 days after the patient is admitted, whichever is sooner.<br>(c) If the person has only completed the first step of a two-step Mantoux tuberculin skin test within | D 216   |   |   |

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| D 216   | Continued From page 6<br><br>the 12 months preceding admission, ensure that the person has a second two-step Mantoux tuberculin skin test or other single-step tuberculosis screening test. After a person has had an initial tuberculosis screening test, the facility or home shall ensure that the person has a single tuberculosis screening test annually thereafter, unless the medical director or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.<br>3. A person with a documented history of a positive tuberculosis screening test is exempt from skin testing and routine annual chest radiographs, but the staff of the facility or home shall ensure that the person is evaluated at least annually for the presence or absence of symptoms of tuberculosis.<br>4. If the staff of the facility or home determines that a person has had a cough for more than 3 weeks and that he has one or more of the other symptoms described in paragraph (a) of subsection 2, the person may be admitted to the facility or home if the staff keeps the person in respiratory isolation in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200 until a health care provider determines whether the person has active tuberculosis. If the staff is not able to keep the person in respiratory isolation, the staff shall not admit the person until a health care provider determines that the person does not have active tuberculosis.<br>5. If a test or evaluation indicates that a person | D 216   |   |   |

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| D 216   | Continued From page 7<br><br>has suspected or active tuberculosis, the staff of the facility or home shall not admit the person to the facility or home or, if he has already been admitted, shall not allow the person to remain in the facility or home, unless the facility or home keeps the person in respiratory isolation. The person must be kept in respiratory isolation until a health care provider determines that the person does not have active tuberculosis or certifies that, although the person has active tuberculosis, he is no longer infectious. A health care provider shall not certify that a person with active tuberculosis is not infectious unless the health care provider has obtained not less than three consecutive negative sputum AFB smears which were collected on separate days.<br><br>6. If a test indicates that a person who has been or will be admitted to a facility or home has active tuberculosis, the staff of the facility or home shall ensure that the person is treated for the disease in accordance with the recommendations of the Centers for Disease Control and Prevention for the counseling of, and effective treatment for, a person having active tuberculosis. The recommendations are set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.<br>The staff of the facility or home shall ensure that counseling and preventive treatment are offered to each person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.<br><br>8. The staff of the facility or home shall ensure that any action carried out pursuant to this section and the results thereof are documented in the person ' s medical record.<br><br>(Added to NAC by Bd. of Health, eff. 1-24-92; A | D 216   |   |   |

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| D 216   | Continued From page 8<br>3-28-96; R084-06, 7-14-2006)<br><br>Based on record review on 8/19/10, the facility did not ensure 3 of 15 residents met the requirements of NAC 441A.380 concerning tuberculosis testing (Client #3, #7, and #11).<br><br>Severity: 2 Scope: 1   | D 216   |   |   |
| D 231   | NAC 449.144(1)(f) Medication<br><br>1. In programs that permit the self-administration of medication, there must be written policies and procedures governing this activity. The policies must require that:<br>(f) There be documentation in the client ' s record of the name of the medication, dose, route of administration, time and name of the person observing the self-administration or the licensed staff member who administered the medication.<br><br>This Regulation is not met as evidenced by:<br>Based on record review and interview on 8/19/10, the facility failed to maintain accurate documentation of the medication administration record (MAR) for 3 of 15 residents ( Resident #3, Resident #6, and Resident #14.)<br><br>Severity: 2 Scope: 1 | D 231   |   |   |
| D 250   | NAC 449.147(6)(a-d) Dietary Services<br><br>6. A facility with more than 10 clients must:<br>(a) Comply with all applicable provisions of chapter 446 of NRS and the regulations adopted pursuant thereto;   | D 250   |   |   |

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| D 250   | <p>Continued From page 9</p> <p>(b) Obtain the necessary permits from the Bureau of Health Protection Services of the Health Division;</p> <p>(c) Maintain a report of each inspection concerning the sanitation of the facility for at least 1 year after the date of the inspection; and</p> <p>(d) Maintain a report of each corrective action taken to address a deficiency noted in a report described in paragraph (c) for at least 1 year after the date of the corrective action.</p> <p>This Regulation is not met as evidenced by:<br/>Based on observation on 8/19/10, the facility failed to comply with chapter 446 of NRS.</p> <p>Findings include:</p> <p>Kitchen workers did not wash their hands after they had handled soiled kitchenware and returned from outdoors, and before putting on gloves and handling clean kitchenware.</p> <p>There was no detectable sanitizer in the sink used for sanitizing kitchenware.</p> <p>There was no detectable sanitizer in the solution in which wiping cloths were stored.</p> <p>Soiled, wet wiping cloths were on the tables in the kitchen.</p> <p>The person-in-charge of the kitchen at the time of the survey was not food safety certified.</p> <p>The can rack in the dry storage room and the fan</p> | D 250   |   |   |

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| D 250 | <p>Continued From page 10</p> <p>covers in the kitchen were soiled.</p> <p>The floors in the kitchen and dry storage rooms were littered with food debris and dirt.</p> <p>The walls and ceilings in the kitchen and dry storage rooms were soiled.</p> <p>Numerous ceiling lights were in disrepair in the kitchen and dry storage rooms.</p> <p>The gasket on the door of the reach-in refrigerator in the dry storage room was in disrepair.</p> <p>Severity: 2 Scope: 3</p> | D 250 |  |  |
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