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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING _____ B. WING _____	**01/02/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DUNCAN MANOR GROUP HOME	**6165 DUNCAN DRIVE, LAS VEGAS, NEVADA ,89108**

(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 re-grading survey initiated at your facility on 01/02/19, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility was licensed for nine Residential Facility for Group beds for elderly and disabled persons and/or persons with mental illnesses, Category II residents. The census at the time of the survey was one. One resident file was reviewed and four 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 investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. The following deficiencies were identified:	0000		
0050 SS= D	449.194(1) - Administrator's Responsibilities-Oversight - NAC 449.194 Responsibilities of administrator. The administrator of a residential facility shall: 1. Provide oversight and direction for the members of the staff of the facility as necessary to ensure that residents receive needed services and protective supervision and that the facility is in compliance with the requirements of NAC 449.156 to 449.27706, inclusive, and chapter 449 of NRS.	0050	Employee #2 is the owner of Duncan Manor. She is called the manager of the facility but only became she is in charge of buying all the necessities needed at the facility. she has 4 employee. 3 of whom are permanent ones who are at the facility 24/7. She will not be working at the facility but go there being the owner to make sure all things needed at the home such food, linens, toilities, etc has sample supplies. I will make sure that she will will not work. 1-22 at the facility as a caregiver. Administrator is in charge for compliance	01/30/2019

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | Name: PRUDENCE LANDICHO | Title: Administrator | Date: 02/14/2019

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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0068 SS= D	449.196(1)(d) - Qualifications of Caregivers-English language - NAC 449.196 Qualifications of caregivers. 1. A caregiver of a residential facility must: (d) Demonstrate the ability to read, write, speak and understand the English language. Inspector Comments: Based on interview and observation, the facility failed to ensure 1 of 3 Employees could communicate and understand the English language (Employee #2). Findings include: Employee #2 was hired on 01/02/19. On 01/02/19 at 12:45 PM, Employee #2, introduced themself as the Manager. A Caregiver indicated it was the Manager's first day of work. When asked questions, the Manager gave a blank stare and motioned to the Caregiver for a response. The Manager indicated she spoke very little English. On 01/02/19 at 1:30 PM, a Caregiver indicated the Manager provided care to the residents as needed. The Manager tried communicating with hand gestures of helping change resident briefs. The Manager apologized for the inability to understand and speak English, and relied on the Caregiver to answer questions. Severity: 2 Scope: 1	0068	Employee #2 is the owner of Duncan Manor. She is called the manager of the facility but only became she is in charge of buying all the necessities needed at the facility. she has 4 employee. 3 of whom are permanent ones who are at the facility 24/7. She will not be working at the facility but go there being the owner to make sure all things needed at the home such food, linens, toilities, etc has sample supplies. I will make sure that she will will not work. 1-22 at the facility as a caregiver. Administrator is in charge for compliance	01/31/2019

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0072 SS= D	449.196(3)(a-c) - Qualifications of Caregiver-Med Training - NAC 449.196 Qualifications of caregivers. 3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must: (a) Before assisting a resident in the administration of a medication, receive the training required pursuant to paragraph (e) of subsection 6 of NRS 449.037, which must include at least 16 hours of training in the management of medication consisting of not less than 12 hours of classroom training and not less than 4 hours of practical training, and obtain a certificate acknowledging the completion of such training; (b) Receive annually at least 8 hours of training in the management of medication and provide the residential facility with satisfactory evidence of the content of the training and his or her attendance at the training; (c) Complete the training program developed by the administrator of the residential facility pursuant to paragraph (e) of subsection 1 of NAC 449.2742; and Inspector Comments: Based on record review and interview, the facility failed to ensure 1 of 3 Employees (Employee #2) completed the initial 16 hour medication management training. Findings include: The employee (Manager) was hired on 01/02/19. The file contained eight hours of annual medication training dated 12/08/18. The file lacked evidence the initial 16-hour medication management training was completed. The Manager could not provide an answer as to how the Medication Management course was completed with little English spoken. A Caregiver reported the Manager's brother had translated the class. Severity: 2 Scope: 1	0072	Employee #2 will never work at the facility. She is the owner and her only job at the facility is to make sure that all needed supplies such food, toileties, linens,etc are in abundance.she has 4 employee, 3 whom are permanent ones. i have a meeting with the owner and employee on 1-18-2019 to make sure that nobody will be working at the facility without proper qualification. Administrator is in charge for compliance	01/30/2019

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0108 SS= D	449.200(3) - Per File - Storage & Availability - NAC 449. 200 Staffing requirements; limitations on number of residents; written schedule required for each shift. 3. The administrator may keep the personnel files for the facility in a locked cabinet and may, except as otherwise provided in this subsection, restrict access to this cabinet by other employees of the facility. Copies of the documents which are evidence that an employee has been certified to perform first aid and cardiopulmonary resuscitation and that the employee has been tested for tuberculosis must be available for review at all times. The administrator shall make the personnel files available for inspection by the bureau within 72 hours after the bureau requests to review the files.	0108	All files of employees and residents are in a lock cabinet and is available for inspection at all times. I will inspect the facility every week to make sure that all paperwork is safe and in locked cabinet Administrator is in charge for compliance	01/30/2019
0173 SS= D	449.209(3) - Health and Sanitation-Inside garbage - NAC 449.209 Health and sanitation. 3. Containers used to store garbage in the kitchen and laundry room of the facility must be covered with a lid unless the containers are kept in an enclosed cupboard that is clean and prevents infestation by rodents or insects. Containers used to store garbage in bedrooms and bathrooms are not required to be covered unless they are used for food, bodily waste or medical waste.	0173	The kitchen has a container that is covered and all bedrooms have waste basket. No food is allowed at the bedroom. Administrator is in charge for compliance	01/30/2019
0174 SS= F	449.209(4)(a) - Health and Sanitation-Offensive odors - NAC 449.209 Health and sanitation. 4. To the extent practicable, the premises of the facility must be kept free from: (a) Offensive odors.	0174	The facility is clean and free of any offensive odor. Administrator is in charge to make sure the facility is clean and odorless at all times.	01/30/2019
0176 SS= I	449.209(4)(c) - Health and Sanitation-Insects, Rodents - NAC 449.209 Health and sanitation. 4. To the extent practicable, the premises of the facility must be kept free from: (c) Insects and rodents.	0176	The facility is free from any insects or roaches	01/30/2019

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0178 SS= F	449.209(5) - Health and Sanitation-Maintain Int/Ext - NAC 449.209 Health and sanitation. 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.	0178	The facility is equipped with build in dispenser for soap and towels. Each resident has their own container with their personal necessities such as toothbrush, face soap, etc. I have a meeting with the owner and employees to make sure that there is always enough supplies at the facility.. I will visit the facility to make sure they are compliance. Administrator is in charge.	01/31/2019
0250 SS= F	449.217(1) - Kitchens-Equipment works; Clean and Sanitary - NAC 449.217 Kitchens; storage of food; adequate supplies of food; permits; inspections. 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition.	0250	The facility is equipped with build in dispenser for soap and towels. Each resident has their own container with their personal necessities such as toothbrush, face soap, etc. I have a meeting with the owner and employees to make sure that there is always enough supplies at the facility.. I will visit the facility to make sure they are compliance. Administrator is in charge.	01/31/2019
0357 SS= D	449.222(7) - Bathrooms and Toilet Facilities - NAC 449.222 Bathrooms and toilet facilities; toilet articles. 7. Each resident must have his own toilet articles and must be provided with toilet paper, individual towels and wash cloths. Paper towels may be used for hand towels. The towels and wash cloths must be changed as often as is necessary to maintain cleanliness, but in no event less often than once each week. A soap dispenser may be used instead of individual bars of soap.	0357	The facility is equipped with build in dispenser for soap and towels. Each resident has their own container with their personal necessities such as toothbrush, face soap, etc. I have a meeting with the owner and employees to make sure that there is always enough supplies at the facility.. I will visit the facility to make sure they are compliance. Administrator is in charge.	01/31/2019

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0870 SS= D	449.2742(1)(a-c) 2 - Medication Administration - NAC 449.2742 Administration of medication: Responsibilities of administrator, caregivers and employees of facility. 1. The administrator of a residential facility that provides assistance to residents in the administration of medications shall: (a) Ensure that a physician, pharmacist or registered nurse who does not have a financial interest in the facility: (1) Reviews for accuracy and appropriateness, at least once every 6 months the regimen of drugs taken by each resident of the facility, including, without limitation, any over-the-counter medications and dietary supplements taken by a resident; and (2) Provides a written report of that review to the administrator of the facility; (b) Include a copy of each report submitted to the administrator pursuant to paragraph (a) in the file maintained pursuant to NAC 449.2749 for the resident who is the subject of the report; and (c) Make and maintain a report of any actions that are taken by the caregivers employed by the facility in response to a report submitted pursuant to paragraph (a). 2. Within 72 hours after the administrator of the facility receives a report submitted pursuant to paragraph (a) of subsection 1, a member of the staff of the facility shall notify the resident ' s physician of any concerns noted by the person who submitted the report. The report must be reviewed and initialed by the administrator.	0870	The facility have a medication administration record (MAR) of all residents. All employees are trained to do medication. I have a weekly meeting with the owner and employee every week to discuss all aspects of taking care of the elderly and dementia. Alzheimer's patient. Administrator is in charge for compliance.	01/31/2019
0871 SS= D	NAC 449.2742(1)(d)(1-8)(1)(e) - Medication Plan - NAC 449.2742 Administration of medication: Responsibilities of administrator, caregivers and employees of facility. 1. The administrator of a residential facility that provides assistance to residents in the administration of medications shall: d) Develop and maintain a plan for managing the administration of medications at the residential facility, including, without limitation: (1) Preventing the use of outdated, damaged or contaminated	0871	We have a Medication Administration Record (MAR) . All residents medication records indicated in the MAR and all the employees are trained to give medication to the resident The Dr/Pharmacy of each residents are informed a week before any medication is consumed to ensure no residents will miss any of their meds. I will inspect the facility every month to make sure that all meds are complete and current. All employees have access to computers and phone and can be access to	01/31/2019

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	medications; (2) Managing the medications for each resident in a manner which ensures that any prescription medications, over-the-counter medications and nutritional supplements are ordered, filled and refilled in a timely manner to avoid missed dosages; (3) Verifying that orders for medications have been accurately transcribed in the record of the medication administered to each resident in accordance with NAC 449.2744; (4) Monitoring the administration of medications and the effective use of the records of the medication administered to each resident; (5) Ensuring that each caregiver who administers a medication is in compliance with the requirements of subsection 6 of NRS 449.037 and NAC 449.196; (6) Ensuring that each caregiver who administers a medication is adequately supervised; (7) Communicating routinely with the prescribing physician or other physician of the resident concerning issues or observations relating to the administration of the medication; and (8) Maintaining reference materials relating to medications at the residential facility, including, without limitation, a current drug guide or medication handbook, which must not be more than 2 years old or providing access to websites on the Internet which provide reliable information concerning medications. (e) Develop and maintain a training program for caregivers of the residential facility who administer medication to residents, including, without limitation, an initial orientation on the plan for managing medications at the facility for each new caregiver and an annual training update on the plan. The administrator shall maintain documentation concerning the provision of the training program and the attendance of caregivers.		them whenever needed to guide them regarding medication. I have a meeting with the owner and employees and showed them how to Google certain medication and get the result of any question. I will have a meeting weekly to discuss all aspects of care giving. Administrator is in charge for compliance	

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0930 SS= D	449.2749(1)(a) - Resident File-Storage, Res Information - NAC 449.2749 Maintenance and contents of separate file for each resident; confidentiality of information. 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: (a) The full name, address, date of birth and social security number of the resident. Inspector Comments: Based on observation and interview, the facility failed to properly store and protect resident records. Findings include: On 01/02/19 at 12:45 PM, a tour of the garage revealed binders labeled with resident names in a two drawer file cabinet. The file cabinet had a key in the lock but the key did not lock the cabinet. On 01/02/19 at 12:45 PM, a Caregiver indicated the file cabinet locked but was unable to lock the drawer. The Caregiver indicated the resident files should have been locked. Severity: 2 Scope: 1	0930	All records of residents and employees are stored in a lock cabinet. There is a separate cabinet for residents who have either left the facility or passed away. I have a meeting with the owner and employee to make sure that all cabinets will be locked all the time. I will inspect the facility weekly to ensure compliance	01/31/2019

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0938 SS= D	449.2749(1)(g)(1) - Resident file - ADL Evaluation Admission - NAC 449.2749 Maintenance and contents of separate file for each resident; confidentiality of information. 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: (g) An evaluation of the resident's ability to perform the activities of daily living and a brief description of any assistance he needs to perform those activities. The facility shall prepare such an evaluation: (1) Upon the admission of the resident. Inspector Comments: Based on interview and record review, the facility failed to ensure an Activity of Daily Living assessment and an evaluation of assistance with Activities of Daily Living (ADLs) was completed for 1 of 1 residents (Resident #1). Findings include: Resident #1 was admitted on 12/29/18, with diagnoses including osteoarthritis, hypertension and right hip pain. The file lacked documented evidence an ADL assessment was completed upon admission. On 01/03/19 at 01:15 PM, a Caregiver indicated the ADL assessment had not been completed and should have been upon admission. Severity: 2 Scope: 1	0938	All residents have ADL upon admission to the facility. I will make sure that each one of the residents are evaluated upon admission and ADL is complete. I will inspect the facility every week to make sure that all residents have their ADL. Administrator is in charge for compliance	01/31/2019

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1070 SS= C	449.27704 - Placard Display - Placard: Issuance and display. 2. The administrator shall, within 24 hours after receipt of the placard, display or cause the placard to be displayed conspicuously in a public area of the residential facility. Inspector Comments: Based on observation and interview, the facility failed to display the grade placard in a conspicuous place. Findings include: Based on observation and interview, the facility failed to display the Letter Grade Placard in a conspicuous place. Findings include: On 01/02/19 at 12:30 PM, upon entry to the facility, the letter grade 'A' from the 04/03/18, state licensure survey was posted instead of the 'D' letter grade issued on 09/10/18. On 01/02/18 at 12:30 PM, the Administrator indicated the 'D' letter grade was never received and did not follow-up on it. Severity: 1 Scope: 3	1070	The placard is now on display at the facility. I will make sure that the placard will be displayed. Administrator is in charge for compliance	01/31/2019