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 _____	**01/20/2022**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE AMERICANA ASSISTED LIVING	**100 SOUTH 14TH STREET, LAS VEGAS, NEVADA ,89101**

(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 complaint investigation completed at your facility on 01/20/22, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The census at the time of the survey was 58. The sample size was five. The facility received a grade of A. There was one complaint with one allegation investigated. Complaint #NV00065350 with the allegation an employee entered residents' rooms without knocking and screamed at residents was substantiated. See Tag 592 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		
0592 SS= E	Rights of Residents; Procedure for Filing - NAC 449.268 Rights of residents; procedure for filing grievance, complaint or report of incident; investigation and response. (NRS 449.0302) 1. The administrator of a residential facility shall ensure that: (c) The residents are treated with respect and dignity; Inspector Comments: Based on document review and interview, the facility failed to ensure residents were treated with dignity and respect for 3 of 5 sampled residents (Resident #1, #2, and #3). Findings include: Resident #1 (R1) R1 was admitted on 09/07/21, with diagnoses including depression. R1 reported Employee #1 was negative and yelled all the time. Resident #2 (R2) R2 was admitted on 09/26/20, with diagnoses including hypertension. R2 reported Employee #1 had yelled at R2 for not wearing a face mask properly and entered R2's room without knocking.	0592	1. 1. The specific finding is that Employee was not approaching theresidents with dignity and respect. We will correct this finding by HumanResources terminating this employee. This was the third incident this employeehad with residents. The employees are trained on dignity and respect inour initial training and this employee hired in May of 2021 and had receivedmonthly training listed in attachment. Still this may not be the careersfor them. 2. The systematic change that will be put into place i sat the Residents' council meeting we will go over Complaints and Grievances andmake sure they have access to the forms at the front of Americana	01/20/2022

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Name: NICHOLE SCHMAL Title: Administrator Date: 02/04/2022

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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	Resident #3 (R3) R3 was admitted on 08/30/21, with diagnoses including insulin resistance. R3 reported Employee #1 was tough and wasn't nice to the residents. R3 indicated Employee #1 had yelled at residents. Incident reports revealed the following: - 12/15/21, A resident was taking a shower and Employee #1 entered the resident's room at 7:00 AM, without announcing who the staff member was before entering the room. - 12/16/21, Employee #1 entered a resident's room unannounced several times daily leaving the door open. Employee #1 was disrespectful and demeaning. - 01/19/22, A Resident asked Employee #1 for a pillow, Employee #1 replied "excuse me very loudly" and ignored the resident. On 01/19/22 at 9:30 AM, the Director acknowledged she had received complaints from residents regarding Employee #1. The Director explained residents had complained the Employee #1 yelled at them and entered their rooms without knocking. The Director indicated Employee #1 had received disciplinary action. A Performance Warning dated 12/14/21, documented Employee #1 showed unprofessional conduct when dealing with residents, was being confrontational, and was heard arguing with a resident. The Director and Administrator verbalized the Employee #1 had a meeting scheduled for 01/20/22, with the Human Resources Department regarding unprofessional conduct. The facility's policy titled Personal Rights, undated, documented staff will observe and respect the personal rights of all residents residing in the community. Severity: 2 Scope: 2		AssistedLiving. Weekly we will have a Complaint and Grievances meeting with the ExecutiveDirector and the Administrator noting any concerns and how we can address them quickly. 3. This process will be monitored monthly forcomplaints by the Executive Director, Human Resources and Administrator 4. The Executive Director will email the forms to HumanResources and the Administrator for action to occur on either or bothdepartments. 5. This will be up at the front of Americana Assisted Living February 3, 2022 posted for all residents to fill in or take with. 6. Attached Complaints and Grievances form along with the yearly staff training log for Dignity and Respect. 7. We will be effective in correcting not only Dignity and Respect issues but also any complaints in the Kitchen or Activities can be address be for there are unhappy residents.	