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
	2677	A. BUILDING _____ B. WING _____	11/18/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PRINCESS 2 GROUP HOME	**10019 PRINCESS CUT ST, LAS VEGAS, NEVADA ,89183**

(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 COVID-19 focused infection control State Licensure survey conducted at your facility on 11/18/20, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for seven Residential Facility for Group beds for elderly and disabled persons and/or persons with mental illness, Category II residents. The census at the time of the survey was five. The facility had no residents or staff positive with COVID-19. The focused COVID-19 infection control survey included the following: Observations: - Facility staff checked the temperature of the health facility inspector prior to entry to the facility. - The health facility inspector was required to answer COVID-19 screening questions related to symptoms, travel history, and exposure to the virus at other facilities prior to entry to the facility. - The health facility inspector was asked to use hand sanitizer prior to entry to the facility. - Residents were in the hallways of the facility wearing masks and social distancing. - The caregivers wore surgical masks and gloves while providing care. - The caregivers washed hands and utilized alcohol-based hand sanitizers before and after interacting with residents. - Hand sanitizer was located at the main entrance and throughout the facility. Interview: The Executive Director verbalized the following: - Screening and temperature checks were completed for staff and healthcare workers upon entrance to the facility. - Temperature checks for residents were conducted once a day in the morning. - Medical professionals were the only persons allowed entry to the facility. - Residents were served meals at the dining table with chair removed between residents to adhere to social distancing practices. - Activities were provided in bedrooms and in the common areas of the facility with residents social distancing. - Staff sanitized all high touch areas three to five times a day with disinfectant wipes. - The facility had seven boxes of gloves; 280 surgical	0000		

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	masks; no N95 masks; five gowns, five face shields; two non-contact electronic thermometers; two 28 ounce bottles of hand sanitizer and 30 one ounce bottles of hand sanitizer. - Training was held for staff on proper donning and doffing personal protective equipment (PPE) in September of 2020 and monthly trainings are held. - The facility had N95 masks ordered and due for delivery. None of the employees were medically cleared and fitted for N95 masks. The facility was provided guidance to have at least one caregiver medically cleared and fitted to use N95 masks once they were received, in the event a resident becomes positive for COVID-19. - The facility was provided guidance on where they could have caregivers medically cleared/fit tested for the N95 masks and called to make an appointment during the inspection. Record Review: - Infection Control Program policies and procedures documented measures to ensure isolation and prevention of COVID-19. - Standard and transmission-based precautions for COVID-19. - Visitor entry and facility screening practices including screening questions, hand sanitization and temperature checks. - Education, monitoring and screening practices of staff including proper PPE use, temperature checks, hand washing and sanitization. - Facility policies and procedures to address staffing issues during emergencies, such as the transmission of COVID-19. - Separate area will house residents in the case of a positive resident in the facility. - N95 order invoice. 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. There were no deficiencies identified.			