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
	4406	A. BUILDING _____ B. WING _____	07/22/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
V N SENIOR CARE OF THE VINEYARDS	1931 W VINEYARD DRIVE SOUTH, PAHRUMP, NEVADA ,89048

(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 survey and an annual State Licensure survey conducted in your facility on 07/22/20, in accordance with Nevada Administrative Code (NAC) Chapter 449, Residential Facility for Groups. The facility is licensed for ten Residential Facility for Group beds for elderly and disabled persons and/or persons with Alzheimer's disease, Category II residents. The census at the time of the survey was seven. Seven resident files and five employee files were reviewed. The facility received a grade of A. The focused COVID-19 infection control survey included the following: Observations: - Facility staff checked the temperatures of the health facility inspectors prior to entry to the facility using an infra-red thermometer and the health facility inspectors were required to fill out a questionnaire about COVID-19 symptoms and travel history. - Social distancing was practiced throughout facility. Residents were in their bedrooms or social distanced in chairs in the living room. - Staff disinfected common areas throughout the facility with disinfectant. - Staff wore surgical masks throughout the facility. - Staff were observed washing hands and utilizing alcohol-based hand sanitizers. - Residents wore masks of various styles when moving throughout the facility. Masks were not worn by residents while in their bedrooms. - Instructions related to wearing mask and social distancing were posted on the wall and on a table at the entry way of the facility. - Three 32-ounce bottles of hand sanitizer and one 64-ounce bottle were observed at the entrance to the facility and signs were posted on the front door requiring masks and gloves. - A box of gloves was mounted on the front door. - The facility had 110 Surgical Masks available. Interviews: - The caregiver reported high touch areas and furniture are sanitized at least two times a day. - The manager reported, except for essential services from home health and hospice personnel, visitors are not allowed in the	0000		

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	facility. Family can visit residents outside the front of the facility and must wear masks and practice social distancing. Family and healthcare professionals have temperature checks and are required to fill out a questionnaire about COVID-19 symptoms and travel history. Staff are screened with temperature checks when they report to work. - The facility had three boxes of gloves. One located at the front door and two others located in a closet storage area. - The caregiver produced a log and reported documenting resident's temperatures daily. - The manager reported all residents and staff were tested for COVID-19 on 07/07/20 and all tested negative. - The manager reported the facility utilizes disposable dishes and utensils. Glass dishes, if used, are sanitized in the dishwasher immediately after meals are served. Meals are served at two separate dining rooms and in the living room to maintain social distancing. - The manager reported staff received training on COVID-19 protection and isolation. Documentation: - Resident temperature checks were documented daily on a calendar style spreadsheet/log. - Infection control/COVID-19 prevention guidelines were posted on the living room wall. - The facility had infection control policies and procedures based on Centers for Disease Control and Prevention and State of Nevada Health and Human Serviced recommendations. The policies/guidelines included standard and transmission based precautions; visitor entry and facility screening practices; education, monitoring and screening practices of staff; and addressing staffing issues during emergencies, such as the transmission of COVID-19. 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. No regulatory deficiencies were identified. No further action is necessary. Please retain a copy for your records.			