STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	9789	A. BUILDING _____ B. WING _____	11/02/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
D' CAESARS CARE HOME	3856 JEWEL AVENUE, LAS VEGAS, NEVADA ,89121

(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
RFG 0001-Deficiencies	The Statement of Deficiencies was generated as a result of a state licensure survey conducted in your facility, in accordance with Nevada administrative code, chapter 449, and Nevada revised statutes chapter 449- Residential Facility for Groups (RFG), medical facilities and other related entities. The findings and conclusions of any investigation by the Division of Health Care Purchasing and Compliance shall not be construed as prohibiting any criminal civil investigation, actions or other claims for reliefs that may be available to any party under applicable federal, state or local law. Based on an inspection conducted, the items marked below identify the violation in operation of the RFG which must be corrected by the revisit/compliance date specified in writing by the health authority. Failure to comply with this notice and immediately correct the identified deficiencies may result in the suspension or termination of your provider agreement, funding, or future authorization as a provider authorized by the State	RFG 0001-Deficiencies		

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	of Nevada pursuant to NAC 433.384, and other applicable local and state laws. Inspector Comments: This Statement of Deficiencies was generated as a result of an annual state licensure survey completed at your facility on 11/02/26. The facility is licensed for 10 Residential Facility for Group beds for elderly and disabled persons, with endorsements for mental illness, Category II residents. The census at the time of the survey was five. Five resident files and three employee files were reviewed. The facility received a grade of A.			
Y 0250 SS= F	NAC 449.217 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. 2. Perishable foods must be refrigerated at a temperature of 40 degrees Fahrenheit or less. Frozen foods must be kept at a temperature of 0 degrees Fahrenheit or less. 3. Sufficient storage must be available for all food and equipment used for cooking and storing food. Food that is stored must be appropriately packaged. 4. The administrator of a residential facility shall ensure that there is at least a 2-day supply of fresh food and at least a 1-week	Y 0250	Y0250 1) To correct the specific deficiency is never accept any donated groceries and food pantry. Like eggs canned foods and fresh vegetables. All items found by surveyor that are expired was discarded right after he left. Six cartoons of eggs and all items found in the pantry that are expired were disposed. 2) To make sure that this deficiency will not occur, the owner and lead caregiver would check the refrigerator regularly if the food stored in the refrigerator appropriately packaged. 3) The corrective action will be monitored by owner and administrator. 4) The responsible persons to make sure that the plan of correction is implemented are the administrator and owner. 5) Corrective action was done 11-3-26	11/07/2026

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	supply of canned food in the facility at all times. 5. Pesticides and other toxic substances must not be stored in any area in which food, kitchen equipment, utensils or paper products are stored. Soaps, detergents, cleaning compounds and similar substances must not be stored in any area in which food is stored. Inspector Comments: Based on observation and interview, the facility failed to ensure expired foods were discarded. Findings include: On 11/02/26 in the morning, the following food items were in the kitchen storage area and were expired. In the main kitchen pantry located in the kitchen, the following were found: A box of Italian breadcrumbs had an expiration date of 05/29/26. A can of fruit cocktail had an expiration date of 10/20/25. Seven cartons of eggs had an expiration date of 10/27/26. A can of diced tomatoes had an expiration date of 02/2026. A box of organic cheesy ravioli had an expiration date of 01/07/26. A can of tomato sauce had an expiration date of 04/28/26. A can of enchilada sauce had an expiration date of 08/30/26.			

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	Four bags of white bread had an expiration date of 10/25/26. A bag of wheat bread had an expiration date of 10/16/26. Two bags of hot dog buns had an expiration date 09/30/26 An open box of Ritz crackers had an expiration date of 05/02/26. Three containers of peanut butter had expiration dates of 06/16/26, 03/02/26 and 08/2023. A box of cherry gelatin dessert had an expiration date of 10/2025. On 11/02/26 in the morning, the following food items were in the kitchen refrigerator and were expired. A container of pre-packaged cut up watermelon had an expiration date of 10/25/26. A container of pre-packaged cut up fruit salad had an expiration date of 10/28/26. Five cartons of eggs had an expiration date of 10/27/26. A package of chicken had an expiration date 10/23/26. An open container of mushroom sauce had an expiration date of 10/02/26. On 11/02/26 in the morning, E3 was not aware the food was expired and acknowledged the expired items should have been discarded. This is a repeat deficiency from 11/04/25.			

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	Severity:2 Scope: 3			
Y 0690 SS= D	**NAC 449.2712 Residents requiring use of oxygen.** 1. A person who requires the use of oxygen must not be admitted to a residential facility or be permitted to remain as a resident of a residential facility unless he: (a) Is mentally and physically capable of operating the equipment that provides the oxygen; or (b) Is capable of: (1) Determining his need for oxygen; and (2) Administering the oxygen to himself with assistance. 2. The caregivers employed by a residential facility with a resident who requires the use of oxygen shall: (a) Monitor the ability of the resident to operate the equipment in accordance with the orders of a physician; and (b) Ensure that: (1) The resident's physician evaluates periodically the condition of the resident which necessitates his use of oxygen; (2) Signs which prohibit smoking and notify persons that oxygen is in use are posted in areas of the facility in which oxygen is in use or is being stored; (3) Persons do not smoke in those areas where smoking is prohibited;	Y 0690	Y0690 1) The Oxygen tanks found in resident room was placed in the tank holder as soon as the surveyor left the facility. 2) 3 Oxygen tank are stored in an appropriate O2 tank holder. Attachment enclosed. 3) Corrective action will be monitored by lead caregiver and owner. 4)The responsible person to make sure that the plan of correction is implemented are owner and administrator. 5) Corrective action was done 11-2-26	11/07/2026

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	(4) All electrical equipment is inspected for defects which may cause sparks. (5) All oxygen tanks kept in the facility are secured in a stand or to a wall; (6) The equipment used to administer oxygen is in good working condition; (7) A portable unit for the administration of oxygen in the event of a power outage is present in the facility at all times when a resident who requires oxygen is present in the facility; and (8) The equipment used to administer oxygen is removed from the facility when it is no longer needed by the resident. 3. The administrator of a residential facility shall ensure: (a) The caregivers who may be required to administer oxygen have demonstrated the ability to operate properly the equipment used to administer oxygen; and (b) All caregivers are trained and knowledgeable regarding hazards and precautions to take when oxygen is in use. Inspector Comments: Based on observation and interview, the facility failed to ensure oxygen (O2) canisters were properly stored and secured. On 11/02/26 in the morning, three O2 canisters were found in a resident closet on the floor and were not stored in an appropriate O2 tank holder. On 11/02/26 in the morning, E3 confirmed the O2 canisters were not properly stored and should have been stored securely. Severity: 2 Scope: 1			