

Division of Health Care Financing and Policy (DHCFP)
HCB Settings Heightened Scrutiny Questionnaire

Setting: Dignified Care Manor

Location: 2915 El Camino Road, Las Vegas, NV 89146

What are the licensure requirements or regulations for the setting?

This provider is required to obtain and maintain licensure from the State of Nevada's Bureau of Health Care Quality and Compliance (HCQC). Licensure regulations are dictated by Nevada Revised Statutes (NRS), specifically NRS 449.017, 449.030 – 449.094, 449.186, 449.199 and by Nevada Administrative Code (NAC), specifically 449.011 – 449.0119, 449.156 – 449.2768. These regulations can be found at <http://www.leg.state.nv.us/law1.cfm> and within Appendix A.

How do the licensure requirements or regulations differ from institutional requirements and regulations?

The State of Nevada's Bureau of Health Care Quality and Compliance (HCQC) licenses institutional settings as well, with some similar requirements and some differences. Nursing facility guidelines for obtaining and maintaining licensure are dictated by Nevada Revised Statutes (NRS), specifically 449.089 and 449.119 and by Nevada Administrative Code (NAC), specifically 449.016, 449.2748, 449.644, 449.797, and 449.744-449.74549. These regulations can be found at <http://www.leg.state.nv.us/law1.cfm> and within Appendix B.

Differences in the requirements include service definitions, required content of clinical records, and numerous administrative based regulations, including quality assurance requirements; admission, transfer and discharge requirements; plan of care requirements; financial requirements; medical based quality of care requirements; physical environment requirements; and medical personnel requirements.

Residential housing or zoning requirements.

Zoning is for (R-1) for Residential Suburban (RS)

The proximity to and scope of interactions with community settings used by individuals not receiving Medicaid funded HCBS.

There is much available. However, the mental capacity of Clientele we work with, limits their ability for community interaction. However, if family chooses to take resident family member out, it is encouraged as they wish and allowed accordingly.

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Is public transportation easily accessible? Or, if public transportation is limited, what options are provided for transportation?

Public transportation is available but not used by this group. Each & all transportation need is met by either qualified staff or a family member.

Provider qualifications for staff employed in the setting. Demonstrate that staff are trained specifically for HCB support in a manner consistent with the HCB settings regulations.

All agency personnel, including owners, officers, administrators, managers, employees and consultants must undergo State and Federal Bureau of Investigation (FBI) background check upon licensure as a provider and then at a minimum of every five (5) years thereafter to ensure no convictions of applicable offenses have been incurred and the safety of recipients is not compromised. The DHCFP policy requires all waiver providers have State and Federal criminal history background checks completed. Criminal background checks must be conducted through the Nevada Department of Public Safety (DPS). Providers are required to initiate diligent and effective follow up for results of background checks within 90 days of submission of prints and continue until results are received.

Providers are responsible for maintaining certification, including the use of tax credits, as an assisted living facility in accordance with the provisions of NRS 319.147. Assisted Living staff providing direct care and support to residents will be trained in the functional care skills needed to care for each recipient. Training will include, but not be limited to, techniques such as transfers, mobility, positioning, use of special equipment, identification of signs of distress, First Aid and cardiopulmonary resuscitation (CPR). Within 60 days of employment, the Assisted Living staff must receive not less than 4 hours of training related to the care of the residents. Additionally, Assisted Living staff must receive annually not less than eight (8) hours of training related to providing for the needs of the residents of the Assisted Living facility. If an Assisted Living staff assists a resident of the Assisted Living facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must receive training in medication administration/management. The training must include not less than three (3) hours of instruction in medication administration/management. The caregiver must receive such training at least every three (3) years, and must provide the facility with the documentation that the training requirements were satisfactorily met. Interpersonal and communication skills and appropriate attitudes for working effectively with recipients including: understanding care goals; respecting recipient's rights and needs; respect for age, cultural and ethnic differences; recognizing family relationships; respecting personal property; ethics in dealing with the recipient, family and other providers; handling conflicts and complaints and other topics that are pertinent. Assisted Living staff providing direct care and support to recipients must: be at least 18 years of age, be responsible, mature, and have the personal qualities enabling him or her to understand the problems of the aged and disabled; demonstrate the ability to read, write, speak and understand the English language; possess the appropriate knowledge, skills and abilities to meet the needs of the residents of the Assisted Living facility; and must be knowledgeable about the use of any prosthetic devices or dental, vision, or hearing aids that the recipient is using.

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What services are offered in the setting? Explain how these services support community integration and/or maximize autonomy.

Memory exercises daily as possible based on the progression of the disease. There is very little community integration or activity among this group to prevent a breakdown of harmony within the community. Family members are allowed to take their loved one out as desired with the knowledge that they are responsible for the outcome and their safe return. Occasionally, a resident may be outdoors & have an outburst which may cause alarm in the community. Neighbors seem to understand as staff work to maintain control and calm the situation down.

What procedures are used to ensure recipients are able to participate in activities in the greater community according to their preferences and interests? How is staff trained to support individual choice?

Staff are trained to provide memory recognition exercises, as possible with family, pictures, common objects, items of interest, favorite music selections vocal and or instrumental in the home etc. These Alzheimer's/Dementia residents fail to recognize anyone for who they really are and are neither capable of handling complexed outings with groups of strangers nor such activities apart from a controlled environment.