

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

Setting: Golden Valley Group Care II

Provider ID: 005716024

Location: 1140 Manhattan Street Reno, NV 89512

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.

Per Washoe County Assessor, this property is zoned for SF6 - Reno Single Family Residential (6000 sq ft).

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

Medicaid and non-Medicaid recipients are able to access integrated community settings.

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

Public transportation is accessible such as RTC Access and commercial busses. However, due to most residents' medical condition, the owner or families assist with transportation.

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.

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

Augmented personal care is the services received in the setting to help maintain independence and prevent institutionalization.

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?

Per Marie, caregiver, residents are asked if they would like to participate in the activity. Some residents would like to remain in their room and decline participation. Marie added, majority of their residents have dementia and prefer to just sit in their chairs or nap. The staff undergo training through families, owner and resident's social workers and required training.