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

Setting: Mystic Haven

Location: 3421 Camsore Point Ln. Las Vegas, NV 89129

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.

Single Family Compact Lot District (R-CL)

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

There are various community settings near and around the facility that offer a wide range of scope of interaction for the residents. Most are indicated to be within 3 miles. Such settings are the Red Rock Casino and the Atria which offer many opportunities for social interactions within the community for the residents. Other opportunities providing

interaction in community settings include, but are not limited to attending piano performances, shopping, banking and attending church. For residences unable to attend church d/t LOC or preference, staff arranges for services, such as Holy Communion to take place on site.

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

Public transportation is indicated to be easily accessible, such as RTC. The facility arranges for a caregiver to travel with the resident also PRN and are met by another person at their destination for any needed assistance associated with LOC/functional needs. Residents can request for assistance in completing transportation arrangements PRN. For the recipients able to get in/out of a private vehicle, the facility also aids with transportation to and from community settings PRN.

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.

Some of the services offered in the setting include: meals, daily house hold-like chores: laundry, and cleaning of rooms. Moreover, assistance with transportation to and from MD visits, medication management, ADLs/IADLS PRN and ROM strengthening exercises are other services offered. Ability and desire to complete tasks/activities on independently is noted so as to provide assistance PRN. It was indicated that there are fliers, information from the news paper and via word of mouth as shared within other agencies/facilities of ongoing community activities that is also shared among the recipients. Lastly the resident's preferred choice to attend to any community activity or lack of desire to attend is adhered to.

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?

It was indicated that staff consistently participate in Person Centered Planning and approach. They ask for the residents preferences such as with food and/or any planned social activities. A thorough assessment is completed, especially initially and as needs change so as to accommodate the residences preferences as much as possible. Participation is always encouraged, but never forced. Open communication is strongly utilized, and encouraged as well as respect for the recipient's rights/desires.