

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

Setting: The Victorian Center, LLC

Location: 11 Whitewind Lane. Las Vegas, NV 89110

**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.**

Real Estates Residential (R-E); Planned land use: Rural Neighborhood Preservation

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

There are various scopes of interactions with the community settings within reasonable proximity to the facility. Most are located within 5-10 miles, with majority of the settings where the residents participate in being within 5 miles. Some of these community settings include, but

not limited to the Recreation Center (indoor with many activities), as well as a public park where the residents can take strolls or participate in mild exercises. There are also various stores (Smiths, CVS/Walgreens, Albertsons, Wal-Mart), restaurants, and Churches (Prince of Peace, Christian Central-North) near the facility. While people who meet LOC are welcome at the facility, currently, the individuals at this residence have Alz. at time of the review. With this in mind, it was indicated that the community settings are available to the high functioning individuals, as needed/requested. However the low functioning residents are never isolated and are engaged according to their cognitive level/function capabilities.

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

Per Maria, Public transportation was available to and from the site until a few years ago. Residents were able to utilize the CAT bus and the RTC as needed. However, routes changed and currently, there's no public transportation that is easily accessible. One would have to walk almost a block or two to the nearest bus stop on Hollywood and Charleston area. RTC no longer picks up residents at the facility. She states she's still attempting to advocate for the route changes and hopes that this can be an option again in the future.

Despite the limitations in public transportation, the facility assists with all transportation as needed, whether to MD f/u or to social/public/community settings engagements at all times as needed.

**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.**

ADLs/IADLs, Med. Management, CM and any other pertinent services as needed by the recipients are offered at the site. For those that support community integration and or maximize autonomy, they include shopping, such as at the Boulevard Mall, where the client can chose their own meal preference at the food court, as well as the actual shopping at various stores. Residents are free to choose shops and other items on their own terms, as it's their own money they are spending, thus can keep track of their expenditures as well. At the recreation center, and also at the site, recipients can freely choose the activities to participate in or not.

**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 Maria, residents at the site are treated like family, thus taking the time to familiarize with their needs/wants/desires takes precedence at all times.

Various choices to participate in the great community are offered, and the residents notified a head of time in order to decide whether to participate or not. Every Fri, there are opportunities to travel outside the home and residents can chose and agree on a particular place every time. All are encouraged, but not forced to participate, although Maria indicates that majority are eager to travel to the community settings.

At all times d/t their Dx, their ability to function, decide and comprehend is also held at high regard so as not to leave out the lower functioning individuals as well.

Open communication, Person centered planning approach as well as respect for residents rights to self determination is observed daily at the facility, again as all are treated like family.