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ALL IN GOOD HEALTH.



AGENDA

- 1. Review of state requirement (NAC 449.2756) Residential Facilities for Groups
- 2. Review of federal requirement F689 Skilled Nursing Facilities
- 3. Question-and-answer session (as time allows)

Safety, Personnel, Employee Training



- Under NAC 449.2756 the administrator of a residential facility which
 provides care to persons with Alzheimer's disease shall ensure that
 knives, matches, firearms, tools and other items that could constitute a
 danger to the residents of the facility are inaccessible to the residents.
- Interpretive guidance:
 - All kitchen knives and other sharp utensils need to be kept in locked drawers or cabinets. Note: If the resident is currently demonstrating behaviors such as anxiety, hallucinations, paranoia, or has a documented history of these types or similar behaviors occurring in the past 12 months, determination should be made if the facility proactively took or is taking measures to: 1) secure lighters, lighter fluids, scissors, non-electrical razors, nail clippers, gardening tools, lawn care equipment and 2) any fuel containers, home repair items (nails, screwdrivers, saws, hammers, etc.) or any other type of item that could be used to cause harm to their self or others.





- The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that all toxic substances are not accessible to the residents of the facility.
- Interpretive Guidance:
 - Pesticides, cleaning compounds, cleaning fluids and laundry detergents shall be stored in locked cabinets or locked areas. Items used for daily use such as shampoo, perfume, soap, mouthwash, etc. may be allowed in resident rooms if the resident has demonstrated proper use of those items or is monitored during the use of these products.



Federal Regulation TAG F689 – Accidents and Hazards

§483.25(d) Accidents.

The facility must ensure that the resident environment remains as free of accident hazards as is possible and that each resident receives adequate supervision and assistance devices to prevent accidents.

- "Accident" refers to any unexpected or unintentional incident, which results or may result in injury or illness to a resident.
- "Avoidable Accident" means that an accident occurred because the facility failed to Identify environmental hazards and/or assess individual resident risk of an accident.



- "Unavoidable Accident" means that an accident occurred despite sufficient and comprehensive facility systems designed and implemented to Identify environmental hazards and individual resident risk of an accident, including the need for supervision.
- "Fall" refers to unintentionally coming to rest on the ground, floor, or other lower level.
 - Example: a resident is walking in the hallway, loses their balance and falls to the floor.
 - Factors that contribute to falls include wet floors, poor lighting, incorrect bed height and/or width, unsafe or absent footwear, call lights not being answered promptly.
- Position Change Alarms: Facilities often implement position change alarms as a fall prevention strategy or in response to a resident fall. The alarms are designed to alert staff that the resident has changed position, increasing the risk for falling. Sometimes the change of position alarms is loud and can startle as resident leading to a fall.



- Wandering and Elopement Wandering is random or repetitive locomotion. This
 movement may be goal-directed such as the person appears to be searching for
 something such as an exit) or may be aimless wandering around. It may indicate the
 resident is frustrated, anxious, bored, hungry, or depressed.
- **Elopement** occurs when a resident leaves the premises or a safe area without an order for discharge, leave of absence or the needed supervision to do so.

A resident who leaves a safe area may be at risk of (or has the potential to experience) heat or cold exposure, dehydration, or being struck by a motor vehicle.

Facility policies that clearly define the procedures for assessing or identifying, monitoring and managing residents at risk for elopement can help to minimize the risk of a resident leaving a safe area.



"Hazards" refer to elements of the resident environment that have the potential to cause injury or illness.

The facility has control over their environment and potential hazards

For example: sharp items, such as scissors, kitchen utensils, knitting needles, or other items, may be appropriate for many residents but hazardous for others with cognitive impairments.

Handrails, assistive devices, and any surface that a resident may come in contact with may cause injury if the surface is not in good condition, not dry, or not installed properly.

All staff professional, administrative, maintenance, etc. should be involved in observing and identifying potential hazards in the environment.



Supervision

"Supervision" is an intervention and a means of mitigating the risk of an accident. Facilities are obligated to provide adequate supervision to prevent accidents. The supervision needs to be based on the individual resident's assessed needs and identified hazards in the resident environment. Adequate supervision may vary from resident to resident and from time to time for the same resident.



Resident Smoking

- Some facilities permit residents to smoke tobacco products. In these facilities, the
 resident needs to be assessed to determine if they need assistance and
 supervision with smoking. The assessment should include the resident physical
 and cognitive abilities to safety.
- If the facility identifies that the resident needs assistance and supervision for smoking, the facility includes this information in the resident's care plan, and reviews and revises the plan periodically as needed.
- The facility may designate certain areas for resident smoking. The facility must ensure precautions are taken for the resident's individual safety, as well as the safety of others in the facility.



Such precautions may include:

- Smoking only in designated areas
- Supervising residents whose assessment and care plans indicate a need for assisted and supervised smoking.
- Limiting the accessibility of matches and lighters by residents who need supervision when smoking for safety reasons.
- Smoking by residents when oxygen is in use is prohibited; any smoking by others near flammable substances is also problematic.
- Additional measures may include informing all visitors of smoking policies and hazards.



Water temperature: Water may reach hazardous temperatures in hand sinks, kitchen sinks showers, tubs, and any other locations where hot water is accessible

to a resident.

Water		Time Required for a 3 rd Degree
Temperature		Burn to Occur
155°F	68°C	1 sec
148°F	64°C	2 sec
140°F	60°C	5 sec
133°F	56°C	15 sec
127°F	52°C	1 min
124°F	51°C	3 min
120°F	48°C	5 min
100°F	37°C	Safe Temperatures
		for Bathing (see Note)

NOTE: Burns can occur even at water temperatures below those identified in the table, depending on an individual's condition and the length of exposure.

- The need to monitor the water temperature in accordance with the facility's policy.
- The need to have a process staff are to follow if they think or suspect the water temperatures are too high.



Residents may have conditions that may put them at increased risk for burns caused by scalding. These conditions include:

- Decreased skin thickness and skin sensitivity
- Peripheral neuropathy nerve damage that occurs when peripheral nerves, which are located outside the brain and spinal cord, are unable to communicate properly with the brain, skin, and muscles.
- Decreased agility (reduced reaction time)
- Decreased cognition or dementia
- Decreased mobility
- Decreased ability to communicate.



Resources

Alzheimer's and Related Dementia

More information can be found at <a href="https://documents.com/documents/do



Questions & Answers



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- HCQC: Bureau of Health Care Quality and Compliance
- DPBH: Division of Public and Behavioral Health
- NAC: Nevada Administrative Code
- SNF: Skilled Nursing Facility

