STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	4113	A. BUILDING: _____ B. WING _____	C 03/10/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE WATERMARK AT CHERRY HILLS	6901 SAN VINCENTE AVE NE ALBUQUERQUE, NM 87109

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments Deficiencies were cited during a complaint only survey completed on 03/10/25 for the state requirements of NMAC 8.370.14, Regulations for Assisted Living for Adults. Census: 101 Complaint Intake [redacted] was investigated and deficiencies were not cited. Complaint Intake [redacted] was investigated and deficiencies were not cited. Complaint Intake [redacted] was investigated and deficiencies were cited.	A 000		
A 019	7 NMAC 8.2.19 Staffing Ratios STAFFING RATIOS: The following staffing levels are the minimum requirements. A. The facility shall employ the sufficient number of staff to provide the basic care, resident assistance and the required supervision based on the assessment of the residents ' needs. (1) During resident waking hours, facilities shall have at least one (1) direct care staff person on duty and awake at all times for each fifteen (15) residents. (2) During resident sleeping hours, facilities with fifteen (15) or fewer residents shall have at least one (1) direct care staff person on duty, awake and responsible for the care and supervision of the residents. (3) During resident sleeping hours, facilities with sixteen (16) to thirty (30) residents shall have at least one (1) direct care staff person on duty and awake at all times and at least one (1) additional staff person available on the premises. (4) During resident sleeping hours, facilities with thirty-one (31) to sixty (60) residents shall have at least two (2) direct care staff persons on duty and	A 019	7 NMAC 8.2.19 Staffing Ratios 8.370.14.19 A 1. Staffing schedules reviewed to assure the needs for R#2 are being met for a 2-person transfer assist. Adjustments made to assure two direct care staff members will be available when assistance is needed in a timely manner. Staff were in-serviced on 3/20/25, 3/21/25 and will be ongoing regarding answering pendants and/or assisting the residents request for any assistance in a timely matter. 2. The community RCD, RCC, or designee will monitor schedules daily for sufficient staffing and make any adjustments as needed and report monthly during QAPI for ongoing compliance for a minimum of 90 days. 3. Date of compliance is 3/25/25.	3/25/2025

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A 019	Continued From page 1 awake at all times and at least one (1) additional staff person immediately available on the premises. (5) During resident sleeping hours, facilities with more than sixty-one (61) residents shall have at least three (3) direct care staff persons on duty and awake at all times and one (1) additional staff person immediately available on the premises for each additional thirty (30) residents or fraction thereof in the facility. B. Upon request of the department, the facility shall provide the staffing ratios per each twenty-four (24) hour day for the past thirty (30) days. [7.8.2.19 NMAC - Rp, 7.8.2.18 NMAC, 01/15/2010] This REQUIREMENT is not met as evidenced by: 8.370.14.19 A Based on record review and interview, the facility failed to ensure they had sufficient Direct Care Staff (DCS) on duty and available to provide residents with basic care assistance and the required supervision based on the resident needs during the morning shift (6:00 am to 2:00 pm). This deficient practice could affect the safety and welfare of the 70 (R #s 1-70) residents identified on the resident census provided by the Executive Director (ED) on 03/03/25, to be at risk of harm or injury if there is not adequate staffing available to assist the residents with their care needs. The findings are: A. Record review of Complaint Intake NM [redacted] received on 10/03/24 revealed the complainant	A 019		

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A 019	Continued From page 2 reported: 1. The facility was understaffed, and residents were not receiving assistance when needed. 2. During the morning shift residents who require a two (2) person assist (requiring two caregivers to assist with transfers and other activities of daily living [ADL's]) cannot be transferred or assisted with ADL's due to insufficient staff. 3. Caller waited 2 hours for assistance after using call bell. R #2 B. Record review of R #2's Individual Service Plan (ISP) dated [redacted] revealed R #2 required: 1. For Transfer Assistance, Staff is to provide 2-person assistance with transfers. C. On 03/10/25 at 4:19 pm, during an interview, the Resident Care Coordinator confirmed R #2 requires 2-person assistance for transfers. D. On 03/10/25 at 9:00 am, during an interview, the Resident Care Coordinator (RCC) confirmed the following: 1. During the morning shift when facility residents require assistance with ADL's, DCS staff are taking longer than normal to assist R #2 with transfer from [redacted] 2. R #2 required 2-person transfer assistance.	A 019		