STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	5772	A. BUILDING: _____ B. WING _____	C 07/17/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ARISTOCRAT OPERATING COMPANY II, LLC	1111 E MOUNTAIN AVENUE LAS CRUCES, NM 88001

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8 000	Initial Comments The following deficiencies were cited during a Complaint Survey completed on 07/17/25 for the state requirements of NMAC 8.370.14, Regulations for Assisted Living facilities for Adults. Resident Census: 41 Complaint # NM [redacted] was investigated and deficiencies were cited. Surveyor, Rael, Carla	8 000		
8 036	8 NMAC 370.14.36 Nutrition The facility shall provide planned and nutritionally balanced meals from the basic food groups in accordance with the "recommended daily dietary allowance" of the American dietetic association, the food and nutrition board of the national research council, or the national academy of sciences. Meals shall meet the nutritional needs of the residents in accordance with the "2005 USDA dietary guidelines for Americans." Vending machines shall not be considered a source of snacks. A. Dietary services policies and procedures: The facility will develop and implement written policies and procedures that are maintained on the premises and that govern the following requirements. (1) Meal service: The facility shall: (a) serve at least three meals or their equivalent each day at regular times with no more than 16 hours between the evening meal and morning meal with snacks freely available; (b) provide snacks of nourishing quality and post on the daily menu; (c) develop menus enjoyed by the residents and	8 036		

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8 036	Continued From page 1 served at normal intervals appropriate to the residents' preferences; (d) post the weekly menu, including snacks where residents and families are able to view it; posted menus shall be followed and any substitution shall be of equivalent nutritional value and recorded on the posted menu; identical menus shall not be used within a one week cycle; (e) have special menus or meal items following guidelines from the resident's physician for residents who have medically prescribed special diets; (f) serve all residents in a dining room except for residents with a temporary illness, or with documented specific personal preference to have meals in their room; (g) allow sufficient time for meals to enable residents to eat at a leisurely pace and to socialize; and (h) contact the resident's PCP within 48 hours if a resident consistently refuses to eat. (2) Staff in-service training: The facility shall provide an in-service training program for staff that are involved in food preparation at orientation and at least annually and that includes: (a) instruction in proper food storage; (b) preparation and serving food; (c) safety in food handling; (d) appropriate personal hygiene; and (e) infectious and communicable disease control. B. Dietary records: The facility shall maintain the following documentation onsite: (1) a systematic record of all menus and revisions, including snacks, for a minimum of thirty (30) calendar days; (2) a systematic record of therapeutic diets as prescribed by a PCP;	8 036		

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8 036	Continued From page 2 (3) a copy of the most recent licensing inspection and for facilities with 10 or more residents, a copy of the New Mexico environment department inspection with notations made by the facility of action taken to comply with recommendations or citations; and (4) a daily log of the recorded temperatures for all facility refrigerators, freezers and steam tables maintained and available for inspection for 30 calendar days. C. Clean and sanitary conditions: All practices shall be in accordance with the standards of the state environment department, pursuant to 7.6.2 NMAC. (1) Kitchen sanitation: (a) Equipment and work areas shall be clean and in good repair. Surfaces with which food or beverages come into contact shall be of smooth, impervious material free of open seams, not readily corrodible and easily accessible for cleaning. (b) Utensils shall be stored in a clean, dry place protected from contamination. (c) The walls, ceiling and floors of all rooms that food or drink is stored, prepared or served shall be kept clean and in good repair. (2) Washing and sanitizing kitchenware: (a) All reusable tableware and kitchenware shall be cleaned in accordance with procedures that include separate steps for prewashing, washing, rinsing and sanitizing. (b) Proper dishwashing procedures and techniques shall be utilized and understood by the dishwashing staff. (c) Periodic monitoring of the operation of the detergent dispenser, washing, rinsing and sanitizing temperatures shall be performed and documented. (d) When a dishwashing machine is utilized, the	8 036		

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8 036	Continued From page 3 cleanliness of the machine, its jets and its thermostatic controls shall be monitored and documented by the facility. A monthly log of the recorded temperature of the dishwasher shall be maintained in the facility and available for inspection. (3) Sinks for hand washing shall include hot and cold running water, hand-washing soap and disposable towels. (4) All garbage and kitchen refuse that is not disposed of through a garbage disposal unit shall be kept in watertight containers with close-fitting covers and disposed of daily in a safe and sanitary manner. (5) Cooks and food handlers shall wear clean outer garments and hair nets or caps and shall keep their hands clean at all times when engaged in handling food, drink, utensils or equipment in accordance with the local health authority. Disposable gloves shall be used in accordance with the local health authority. D. Food management: The facility shall store, prepare, distribute and serve food under sanitary conditions and in accordance with the regulations governing food establishments of local health authority having jurisdiction. (1) The facility shall ensure that a minimum of a three calendar day supply of perishables and a five calendar day supply of non-perishables or canned foods is available for the residents. (2) The facility refrigerator and freezer shall have an accurate thermometer which reads within or not more than plus or minus three degrees fahrenheit of the required temperature, located in the warmest section of the refrigerator and freezer and shall be accessible and easily read. (a) The temperature of the refrigerator shall be 35 - 41 degrees fahrenheit. (b) Freezer temperatures shall be maintained at	8 036		

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8 036	Continued From page 4 zero degrees fahrenheit or below. (3) Refrigerators and freezers shall be kept clean and sanitary at all times. Food stored in refrigerators and freezers shall be covered, dated and labeled. Unused leftover food shall be discarded after three calendar days. (4) Steam tables, hot food tables, slow cookers, crock pots and other hot food holding devices shall not be used in heating or reheating food. Hot food temperatures shall be checked periodically to insure that a minimum of 140 degrees fahrenheit is maintained. (5) Medication, biological specimens, poisons, detergents and cleaning supplies shall not be kept in the same storage areas used for storage of foods. Medications shall not be stored in the refrigerator with food; an alternate refrigerator for medication shall be used. (6) Canned or preserved foods shall be procured from sources that process the food under regulated quality and sanitation controls. This does not preclude the use of local fresh produce. The facility shall not use home-canned foods. (7) Dry or staple food items shall be stored at least six inches off the floor in a ventilated room that is not subject to sewage, waste water back-flow or contamination by condensation, leakage, rodents or vermin. (8) The facility shall ensure the following: (a) all perishable food is refrigerated and the temperature is maintained no higher than 41 degrees fahrenheit; (b) the temperature for all hot foods is maintained at 140 degrees fahrenheit; and (c) all displayed or transported food is protected from environmental contamination and maintained at proper temperatures in clean containers, cabinets or serving carts. E. Milk:	8 036		

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8 036	Continued From page 5 (1) Raw milk shall not be used. (2) Condensed, evaporated, or dried milk products that are nationally recognized may be employed as "additives" in cooked food preparation but shall not be substituted or served to residents in place of milk. F. Collateral requirements: Compliance with this rule does not relieve a facility from the responsibility of meeting more stringent municipal regulations, ordinances or other requirements of state or federal laws governing food service establishments. Local health authority having jurisdiction means municipal, county, state or federal agency(s) that have laws and regulations governing food establishments, liquid waste disposal, treatment facilities and private wells. [8.370.14.36 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.36 A (1) (e) Based on record review and interview, the facility failed to ensure for 1 (R #4) of 1 residents who were on a [redacted] diet that there were [redacted] desserts available for lunch. This deficient practice could likely result in the resident not getting to eat dessert if their [redacted] and there are no [redacted] options available in the facility. The findings are: A. Record review of the facility kitchen's [redacted] list revealed R #4 is on a [redacted] B. Record review of R #4's resident file revealed an order for a [redacted] diet dated [redacted] C. Record review of the lunch menu for 07/17/25	8 036	The Adobe Assisted Living will be identifing any poteneial risks based on the nature of the deficiency, by assuring that any diabetic resident with phycian orders always have alternative diabetic desserts. And that they always be availabe at all times. (7-25-2025) The Nurse will monitor and inform the cooks of any resident coming in with special diet orders.And Cooks will make sure we have sugar free desserts and snacks available at all times in hand. The Facility has created a spread sheet that is for any resident with a special diet, so we can keep track of all Special Diets. (7-18-2025) Cooks were in serviced on the importance of a diabetic patient. They must follow the diabetic chart that has been posted in the kitchen. And are to follow the chart for high sugars or even low sugars.	

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8 036	Continued From page 6 revealed: 1. Baked Ziti (pasta) 2. Cauliflower/Broccoli 3. Breadstick 4. Pudding D. On 07/17/25 at 10:20 am, during an interview, Cook #1 stated R #4 would be having more of the protein (ground turkey) being served and less of the pasta (baked ziti). When asked if R #4 would be having the pudding, Cook #1 [redacted] E. Record review of the nutrition facts label for the puddin[redacted] lunch revealed it contained [redacted] per serving. F. On 07/17/25 at 10:23 am, during an [redacted] ere no [redacted] G. [redacted] el for [redacted] H. On 07/17/25 at 10:24 am, during an interview, the Lead Technicia[redacted] e facility did not currently have any [redacted] options for R #4. The Lead Te[redacted] I. On 07/17/25 at 10:24 am, during an interview,	8 036		

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8 036	Continued From page 7 The Registered Nurse (RN) stated if R #4's [redacted]	8 036		
8 038	8 NMAC 370.14.38 Housekeeping Services The facility shall maintain the interior and exterior of the facility in a safe, clean, orderly and attractive manner. The facility shall be free from offensive odors, safety hazards, insects and rodents and accumulations of dirt, rubbish and dust. A. All common living areas and all bathrooms shall be cleaned as often as necessary to maintain a clean and sanitary environment. B. Combustibles such as cleaning rags or flammable substances shall be stored in closed metal containers in approved areas that provide adequate ventilation. Combustibles shall be stored away from the food preparation areas and away from the resident rooms. C. Poisonous or flammable substances shall not be stored in residential areas, food preparation areas or food storage areas. If hazardous chemicals are stored on the property, material safety data sheets shall be maintained and stored in the same area as the chemicals, pursuant to state environment department requirements, 11.5.2.9 NMAC. [8.370.14.38 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.38 Based on observation and interview, the facility	8 038	THE ADOBE ASSISTED LIVING will ensure that all chemiacls and all chemical rooms are always locked at all times. (7-25-2025) (8.370.14.38) In service was implemented with all Employees on the DOH regulations. The Facility will maintain both inside and outside of the facility in clean, and orderly and safe manner. The facility shall also be free from offensive oders. The Admin. and the Admin Assistant will be monitoring and do daily walks through out the entire facility to make sure all chemicals are secure in a locked storage.	

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8 038	Continued From page 8 failed to ensure bathrooms were clean and free of offensive odors, and that poisonous or hazardous chemicals were not unsecured and accessible to residents. These deficient practices could likely result in the residents to be at risk of harm, illness, or injury if the residents were to spill chemicals on themselves or ingest (take food, drink, or another substance in the body by swallowing or absorbing it) the cleaning supplies or hazardous chemicals (any chemical which can cause a physical or a health hazard); or if they are exposed to unsanitary conditions. The findings are: Findings related to the bathrooms: A. On 07/16/25 at 4:15 pm, during an observation of the bathroom next to the activities room and office, the bathroom was observed with a wet, dirty towel on the floor, and a wet, dirty towel on the shower chair. B. On 07/16/25 at 4:40 pm, during an observation of the bathroom next to the activities room and office after it had been cleaned, it smelled strongly of urine. C. On 07/16/25 at 4:44 PM, during an interview, the Lead Technician confirmed the bathroom near the activities room and office was dirty; and that after it had been cleaned, it still had a strong odor of urine. D. On 07/17/25 at 9:49 am, during an observation of the bathroom next to the courtyard exit to the Memory Care, the shower stall floor was dirty (with hair, debris, and dirt). The walls	8 038		

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8 038	Continued From page 9 and baseboards were also dirty (dust and built up dirt) and the window sill had a visible layer of dust and dirt. E. On 07/17/25 at 10:00 am, during an interview, the Registered Nurse (RN) confirmed the bathroom and shower stall were dirty in the bathroom next to the courtyard exit the Memory Care. Findings related to unsecured chemicals: F. On 07/16/25 at 4:47 pm, during an observation of the bathroom in building 2 next to room #14, one quart of bathroom cleaner was observed under the cabinet. G. On 07/16/25 at 4:22 pm, during an observation of the outdoor courtyard near the washer and dryer, one 5-gallon tub of laundry detergent was observed unsecured and accessible to residents. H. On 07/16/25 at 5:08 pm, during an interview, the Administrator (ADM) confirmed the bathroom cleaner in the bathroom next to room #14 in building 2, and the laundry detergent drum outside in the courtyard near the washer and dryer were unsecured and accessible to residents. I. On 07/17/25 at 9:52 am, during observation of the facility (Building 2) Utility room door was unsecured (close to bathroom and Room #14).The following chemicals items were observed: a. A 3.79 liter jug of liquid laundry and air freshner disinfectant. b. A one quart bottle of liquid bathroom cleaner, c. A 32 oz. unlabeled chemical spray bottle.	8 038		

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8 038	Continued From page 10 J. On 07/17/25 at 10:00 am, during an interview, the Registered Nurse (RN) confirmed the unsecured utility room (Building 2 next to bathroom and Rm#14) with chemicals.	8 038		
8 042	8 NMAC 370.14.42 Maintenance of Building and Grounds The building(s) shall be maintained in good repair at all times. Such maintenance shall include, but is not limited to, the following areas: A. Storage areas/grounds: Storage areas and grounds shall be maintained in a safe, sanitary and presentable condition at all times. Storage areas and grounds shall be kept free from accumulation of refuse, weeds, discarded furniture, old newspapers or other items that create a fire hazard. B. Floors: Floors shall be maintained stable, firm and free of tripping hazards. [8.370.14.42 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.42 A, B Based on observation and interview, the facility failed to ensure facility grounds were maintained in a safe, sanitary and presentable condition at all times. Free from accumulated trash, walkways floors were stable, firm and free of tripping hazards (metal rods and nails) and windows had properly fitted and undamaged screens. These deficiency practice could likely result in the 41 (R #s 1-43) residents identified on the census provided by the Executive Director on 07/17/24, to be at risk of injury or illness if they were	8 042	The Adobe Assisted Living Implemented a list for maintenance to ensure that all life safety issues were addressed and done. (7-25-25) A Maintenance Requests form has been established for our maintenance personnel The Director or Assistant will do walk throughs weekly to monitor that all building maintenance requests that are addressed to the Maintenance Supervisor, are completed. The form was implemented and will be signed by the Maintenance Supervisor once all the addressed issues have been resolved and completed. The Administrator or Assistant Administrator will be responsible to monitor and ensure that any maintenance Issue are addressed with the Maintenance Supervisor and are addressed immediately to maintain the safety of all residents and staff.	

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8 042	Continued From page 11 exposed to bugs/insects, allergens (dust/dirt), or debris (leaves or other fragments) coming in through the damaged screens. Also, staff and residents being at risk of tripping over wooden boards and a mini refrigerator door. Staff and residents being harmed or sustaining serious bodily injury by a nail sticking out of the side of the building (near walkway) and a metal pipe sticking out of the ground (near walkway). Along with unsafe practices of residents throwing cigarette butts (uncontained) onto dead leaves/plastic bags and near a wooden fence leading to fire hazards. The findings for accumulated (outdoor) trash: A. On 07/16/25 at 4:44 pm, observation of adjoining courtyard between Building 1 and 2, revealed: 1. A pile of dried leaves with cigarette butts behind a portable storage unit positioned next to a wooden fence. 2. Two plastic bags on the ground with cigarette butts on top located next to the building wall (by the kitchen window). 3. A built-in flower bed next to the building wall with a dozen cigarette butts. B. On 07/17/25 at 10:50 am, observation of exterior building grounds (westside) revealed: 1. A blue (rusted) tall drum (contents unknown) next to a storage unit. 2. Three wooden boards laying on the ground next to a wooden fence. 3. A detached miniature refrigerator door next a walkway. The findings for walkway (floor) hazards: C. On 07/17/25 at 10:48 am, observation of exterior building grounds (westside) revealed:	8 042	(7-16-25) Maintenance cleaned all areas of the facility so they can be free of all leaves. (7-16-25) Maintenance did remove the sand bags that were by the Kitchen window. (7-16-25) Staff cleaned up all ciggerette buds and residents were also advised to please throw thier buds in the ash trays. (7-16-25) Maintenance cleaned all contents that were are the facility to be free of obsticles	

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8 042	Continued From page 12 1. A nail sticking outward (an inch) from the building wall (Approximately a foot up from the ground). 2. A metal rod (measuring an inch) secured in a cement square-sticking upward from the ground (next to a main walkway). The findings for bent and damaged window screens: D. On 07/16/25 at 4:30 pm, observations in the courtyard between Building 2 and the Memory Care Unit revealed: 1. One (1) window in the Memory Care unit, Room 7 had a partially detached and bowed screen. 2. One (1) window in the Memory Care unit, Room 8 had a partially detached and bowed screen. 3. One (1) window in Building 2, Room 24A, had a torn screen. 4. One (1) window in Building 1, a kitchen window was detached and bowed. E. On 07/16/25 at 5:08 pm, the Executive Director confirmed observations of the cigarette butts located in the courtyard (between Building 1 & 2) and window screens (courtyard between Building 2 and Memory Care unit). On 07/17/25 at 10:51 am, the Executive Director confirmed the trash, wooden boards and mini refrigerator door and walkway hazards located west (exterior) of the building.	8 042	(7-16-25) Maintenance replaced the nail sticking out 7/16/25) Maintenance cut off the 1 inch metal rod sticking up. 7-16-25) Maintenance replaced and fixed all window screens that were missing or bent and enssured the all windows were sealed all around.	

Division of Health Improvement

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	5772	A. BUILDING: _____ B. WING _____	C 07/17/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ARISTOCRAT OPERATING COMPANY II, LLC	1111 E MOUNTAIN AVENUE LAS CRUCES, NM 88001

(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
8 000	Initial Comments The following deficiencies were cited during a Complaint Survey completed on 07/17/25 for the state requirements of NMAC 8.370.14, Regulations for Assisted Living facilities for Adults. Resident Census: 41 Complaint # [redacted] was investigated and deficiencies were cited. Surveyor, Rael, Carla	8 000		
8 036	8 NMAC 370.14.36 Nutrition The facility shall provide planned and nutritionally balanced meals from the basic food groups in accordance with the "recommended daily dietary allowance" of the American dietetic association, the food and nutrition board of the national research council, or the national academy of sciences. Meals shall meet the nutritional needs of the residents in accordance with the "2005 USDA dietary guidelines for Americans." Vending machines shall not be considered a source of snacks. A. Dietary services policies and procedures: The facility will develop and implement written policies and procedures that are maintained on the premises and that govern the following requirements. (1) Meal service: The facility shall: (a) serve at least three meals or their equivalent each day at regular times with no more than 16 hours between the evening meal and morning meal with snacks freely available; (b) provide snacks of nourishing quality and post on the daily menu; (c) develop menus enjoyed by the residents and	8 036		

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8 036	Continued From page 1 served at normal intervals appropriate to the residents' preferences; (d) post the weekly menu, including snacks where residents and families are able to view it; posted menus shall be followed and any substitution shall be of equivalent nutritional value and recorded on the posted menu; identical menus shall not be used within a one week cycle; (e) have special menus or meal items following guidelines from the resident's physician for residents who have medically prescribed special diets; (f) serve all residents in a dining room except for residents with a temporary illness, or with documented specific personal preference to have meals in their room; (g) allow sufficient time for meals to enable residents to eat at a leisurely pace and to socialize; and (h) contact the resident's PCP within 48 hours if a resident consistently refuses to eat. (2) Staff in-service training: The facility shall provide an in-service training program for staff that are involved in food preparation at orientation and at least annually and that includes: (a) instruction in proper food storage; (b) preparation and serving food; (c) safety in food handling; (d) appropriate personal hygiene; and (e) infectious and communicable disease control. B. Dietary records: The facility shall maintain the following documentation onsite: (1) a systematic record of all menus and revisions, including snacks, for a minimum of thirty (30) calendar days; (2) a systematic record of therapeutic diets as prescribed by a PCP;	8 036		

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8 036	Continued From page 2 (3) a copy of the most recent licensing inspection and for facilities with 10 or more residents, a copy of the New Mexico environment department inspection with notations made by the facility of action taken to comply with recommendations or citations; and (4) a daily log of the recorded temperatures for all facility refrigerators, freezers and steam tables maintained and available for inspection for 30 calendar days. C. Clean and sanitary conditions: All practices shall be in accordance with the standards of the state environment department, pursuant to 7.6.2 NMAC. (1) Kitchen sanitation: (a) Equipment and work areas shall be clean and in good repair. Surfaces with which food or beverages come into contact shall be of smooth, impervious material free of open seams, not readily corrodible and easily accessible for cleaning. (b) Utensils shall be stored in a clean, dry place protected from contamination. (c) The walls, ceiling and floors of all rooms that food or drink is stored, prepared or served shall be kept clean and in good repair. (2) Washing and sanitizing kitchenware: (a) All reusable tableware and kitchenware shall be cleaned in accordance with procedures that include separate steps for prewashing, washing, rinsing and sanitizing. (b) Proper dishwashing procedures and techniques shall be utilized and understood by the dishwashing staff. (c) Periodic monitoring of the operation of the detergent dispenser, washing, rinsing and sanitizing temperatures shall be performed and documented. (d) When a dishwashing machine is utilized, the	8 036		

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8 036	Continued From page 3	8 036		

cleanliness of the machine, its jets and its thermostatic controls shall be monitored and documented by the facility. A monthly log of the recorded temperature of the dishwasher shall be maintained in the facility and available for inspection.

(3) Sinks for hand washing shall include hot and cold running water, hand-washing soap and disposable towels.

(4) All garbage and kitchen refuse that is not disposed of through a garbage disposal unit shall be kept in watertight containers with close-fitting covers and disposed of daily in a safe and sanitary manner.

(5) Cooks and food handlers shall wear clean outer garments and hair nets or caps and shall keep their hands clean at all times when engaged in handling food, drink, utensils or equipment in accordance with the local health authority. Disposable gloves shall be used in accordance with the local health authority.

D. Food management: The facility shall store, prepare, distribute and serve food under sanitary conditions and in accordance with the regulations governing food establishments of local health authority having jurisdiction.

(1) The facility shall ensure that a minimum of a three calendar day supply of perishables and a five calendar day supply of non-perishables or canned foods is available for the residents.

(2) The facility refrigerator and freezer shall have an accurate thermometer which reads within or not more than plus or minus three degrees fahrenheit of the required temperature, located in the warmest section of the refrigerator and freezer and shall be accessible and easily read.

(a) The temperature of the refrigerator shall be 35 - 41 degrees fahrenheit.

(b) Freezer temperatures shall be maintained at

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8 036	Continued From page 4 zero degrees fahrenheit or below. (3) Refrigerators and freezers shall be kept clean and sanitary at all times. Food stored in refrigerators and freezers shall be covered, dated and labeled. Unused leftover food shall be discarded after three calendar days. (4) Steam tables, hot food tables, slow cookers, crock pots and other hot food holding devices shall not be used in heating or reheating food. Hot food temperatures shall be checked periodically to insure that a minimum of 140 degrees fahrenheit is maintained. (5) Medication, biological specimens, poisons, detergents and cleaning supplies shall not be kept in the same storage areas used for storage of foods. Medications shall not be stored in the refrigerator with food; an alternate refrigerator for medication shall be used. (6) Canned or preserved foods shall be procured from sources that process the food under regulated quality and sanitation controls. This does not preclude the use of local fresh produce. The facility shall not use home-canned foods. (7) Dry or staple food items shall be stored at least six inches off the floor in a ventilated room that is not subject to sewage, waste water back-flow or contamination by condensation, leakage, rodents or vermin. (8) The facility shall ensure the following: (a) all perishable food is refrigerated and the temperature is maintained no higher than 41 degrees fahrenheit; (b) the temperature for all hot foods is maintained at 140 degrees fahrenheit; and (c) all displayed or transported food is protected from environmental contamination and maintained at proper temperatures in clean containers, cabinets or serving carts. E. Milk:	8 036		

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8 036	Continued From page 5 (1) Raw milk shall not be used. (2) Condensed, evaporated, or dried milk products that are nationally recognized may be employed as "additives" in cooked food preparation but shall not be substituted or served to residents in place of milk. F. Collateral requirements: Compliance with this rule does not relieve a facility from the responsibility of meeting more stringent municipal regulations, ordinances or other requirements of state or federal laws governing food service establishments. Local health authority having jurisdiction means municipal, county, state or federal agency(s) that have laws and regulations governing food establishments, liquid waste disposal, treatment facilities and private wells. [8.370.14.36 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.36 A (1) (e) Based on record review and interview, the facility failed to en [redacted] This deficient practice could likely [redacted] findings are: A. Record review of the facilit [redacted] diet list revealed R #4 is on a [redacted] B. Record rev [redacted] s reside [redacted] e revealed an order for a [redacted] dated [redacted] /25. C. Record review of the lunch menu for 07/17/25	8 036	The Adobe Assisted Living will be identifing any poteneial risks based on the nature of the deficiency, by assuring that any diabetic resident with phycian orders always have alternative diabetic desserts. And that they always be availabe at all times. (7-25-2025) The Nurse will monitor and inform the cooks of any resident coming in with special diet orders.And Cooks will make sure we have sugar free desserts and snacks available at all times in hand. The Facility has created a spread sheet that is for any resident with a special diet, so we can keep track of all Special Diets. (7-18-2025) Cooks were in serviced on the importance of a diabetic patient. They must follow the diabetic chart that has been posted in the kitchen. And are to follow the chart for high sugars or even low sugars.	

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8 036	Continued From page 6 revealed: 1. Baked Ziti (pasta) 2. Cauliflower/Broccoli 3. Breadstick 4. Pudding D. On 07/17/25 at 10:20 am, during an interview, Cook #1 stated R #4 would be having more of the protein (ground turkey) being served and less of the pasta (baked ziti). When asked if R #4 would be having the [redacted], Cook #1 stated R #4 could have some as long as [redacted] were not high. Cook #1 stated if R #4's [redacted] were too high, they could give [redacted]. E. Record review of the nutrition facts label for the [redacted] F. On 07/17/25 at 10:23 am, during an observation of the facility's pantry, there were no [redacted] G. Record review of the nutrition facts label for the [redacted]. H. On 07/17/25 at 10:24 am, during an interview, the Lead Technician stated the facility did not currently have any [redacted] for R #4. The Lead Technician confirmed that for lunch later today, [redacted] I. On 07/17/25 at 10:24 am, during an interview,	8 036		

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8 036	Continued From page 7 The Registered Nurse (RN) stated if R #4's [redacted]	8 036		
8 038	8 NMAC 370.14.38 Housekeeping Services The facility shall maintain the interior and exterior of the facility in a safe, clean, orderly and attractive manner. The facility shall be free from offensive odors, safety hazards, insects and rodents and accumulations of dirt, rubbish and dust. A. All common living areas and all bathrooms shall be cleaned as often as necessary to maintain a clean and sanitary environment. B. Combustibles such as cleaning rags or flammable substances shall be stored in closed metal containers in approved areas that provide adequate ventilation. Combustibles shall be stored away from the food preparation areas and away from the resident rooms. C. Poisonous or flammable substances shall not be stored in residential areas, food preparation areas or food storage areas. If hazardous chemicals are stored on the property, material safety data sheets shall be maintained and stored in the same area as the chemicals, pursuant to state environment department requirements, 11.5.2.9 NMAC. [8.370.14.38 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.38 Based on observation and interview, the facility	8 038	THE ADOBE ASSISTED LIVING will ensure that all chemiacls and all chemical rooms are always locked at all times. (7-25-2025) (8.370.14.38) In service was implemented with all Employees on the DOH regulations. The Facility will maintain both inside and outside of the facility in clean, and orderly and safe manner. The facility shall also be free from offensive oders. The Admin. and the Admin Assistant will be monitoring and do daily walks through out the entire facility to make sure all chemicals are secure in a locked storage.	

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8 038	Continued From page 8 failed to ensure bathrooms were clean and free of offensive odors, and that poisonous or hazardous chemicals were not unsecured and accessible to residents. These deficient practices could likely result in the residents to be at risk of harm, illness, or injury if the residents were to spill chemicals on themselves or ingest (take food, drink, or another substance in the body by swallowing or absorbing it) the cleaning supplies or hazardous chemicals (any chemical which can cause a physical or a health hazard); or if they are exposed to unsanitary conditions. The findings are: Findings related to the bathrooms: A. On 07/16/25 at 4:15 pm, during an observation of the bathroom next to the activities room and office, the bathroom was observed with a wet, dirty towel on the floor, and a wet, dirty towel on the shower chair. B. On 07/16/25 at 4: 40pm, during an observation of the bathroom next to the activities room and office after it had been cleaned, it smelled strongly of urine. C. On 07/16/25 at 4:44 PM, during an interview, the Lead Technician confirmed the bathroom near the activities room and office was dirty; and that after it had been cleaned, it still had a strong odor of urine. D. On 07/17/25 at 9:49 am, during an observation of the bathroom next to the courtyard exit to the Memory Care, the shower stall floor was dirty (with hair, debris, and dirt). The walls	8 038		

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8 038	Continued From page 9 and baseboards were also dirty (dust and built up dirt) and the window sill had a visible layer of dust and dirt. E. On 07/17/25 at 10:00 am, during an interview, the Registered Nurse (RN) confirmed the bathroom and shower stall were dirty in the bathroom next to the courtyard exit the Memory Care. Findings related to unsecured chemicals: F. On 07/16/25 at 4:47 pm, during an observation of the bathroom in building 2 next to room #14, one quart of bathroom cleaner was observed under the cabinet. G. On 07/16/25 at 4:22 pm, during an observation of the outdoor courtyard near the washer and dryer, one 5-gallon tub of laundry detergent was observed unsecured and accessible to residents. H. On 07/16/25 at 5:08 pm, during an interview, the Administrator (ADM) confirmed the bathroom cleaner in the bathroom next to room #14 in building 2, and the laundry detergent drum outside in the courtyard near the washer and dryer were unsecured and accessible to residents. I. On 07/17/25 at 9:52 am, during observation of the facility (Building 2) Utility room door was unsecured (close to bathroom and Room #14).The following chemicals items were observed: a. A 3.79 liter jug of liquid laundry and air freshner disinfectant. b. A one quart bottle of liquid bathroom cleaner, c. A 32 oz. unlabeled chemical spray bottle.	8 038		

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8 038	Continued From page 10 J. On 07/17/25 at 10:00 am, during an interview, the Registered Nurse (RN) confirmed the unsecured utility room (Building 2 next to bathroom and Rm#14) with chemicals.	8 038		
8 042	8 NMAC 370.14.42 Maintenance of Building and Grounds The building(s) shall be maintained in good repair at all times. Such maintenance shall include, but is not limited to, the following areas: A. Storage areas/grounds: Storage areas and grounds shall be maintained in a safe, sanitary and presentable condition at all times. Storage areas and grounds shall be kept free from accumulation of refuse, weeds, discarded furniture, old newspapers or other items that create a fire hazard. B. Floors: Floors shall be maintained stable, firm and free of tripping hazards. [8.370.14.42 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.42 A, B Based on observation and interview, the facility failed to ensure facility grounds were maintained in a safe, sanitary and presentable condition at all times. Free from accumulated trash, walkways floors were stable, firm and free of tripping hazards (metal rods and nails) and windows had properly fitted and undamaged screens. These deficiency practice could likely result in the 41 (R #s 1-43) residents identified on the census provided by the Executive Director on 07/17/24, to be at risk of injury or illness if they were	8 042	The Adobe Assisted Living Implemented a list for maintenance to ensure that all life safety issues were addressed and done. (7-25-25) A Maintenance Requests form has been established for our maintenance personnel The Director or Assistant will do walk throughs weekly to monitor that all building maintenance requests that are addressed to the Maintenance Supervisor, are completed. The form was implemented and will be signed by the Maintenance Supervisor once all the addressed issues have been resolved and completed. The Administrator or Assistant Administrator will be responsible to monitor and ensure that any maintenance Issue are addressed with the Maintenance Supervisor and are addressed immediately to maintain the safety of all residents and staff.	

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8 042	Continued From page 11 exposed to bugs/insects, allergens (dust/dirt), or debris (leaves or other fragments) coming in through the damaged screens. Also, staff and residents being at risk of tripping over wooden boards and a mini refrigerator door. Staff and residents being harmed or sustaining serious bodily injury by a nail sticking out of the side of the building (near walkway) and a metal pipe sticking out of the ground (near walkway). Along with unsafe practices of residents throwing cigarette butts (uncontained) onto dead leaves/plastic bags and near a wooden fence leading to fire hazards. The findings for accumulated (outdoor) trash: A. On 07/16/25 at 4:44 pm, observation of adjoining courtyard between Building 1 and 2, revealed: 1. A pile of dried leaves with cigarette butts behind a portable storage unit positioned next to a wooden fence. 2. Two plastic bags on the ground with cigarette butts on top located next to the building wall (by the kitchen window). 3. A built-in flower bed next to the building wall with a dozen cigarette butts. B. On 07/17/25 at 10:50 am, observation of exterior building grounds (westside) revealed: 1. A blue (rusted) tall drum (contents unknown) next to a storage unit. 2. Three wooden boards laying on the ground next to a wooden fence. 3. A detached miniature refrigerator door next a walkway. The findings for walkway (floor) hazards: C. On 07/17/25 at 10:48 am, observation of exterior building grounds (westside) revealed:	8 042	(7-16-25) Maintenance cleaned all areas of the facility so they can be free of all leaves. (7-16-25) Maintenance did remove the sand bags that were by the Kitchen window. (7-16-25) Staff cleaned up all ciggerette buds and residents were also advised to please throw thier buds in the ash trays. (7-16-25) Maintenance cleaned all contents that were are the facility to be free of obsticles	

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8 042	Continued From page 12 1. A nail sticking outward (an inch) from the building wall (Approximately a foot up from the ground). 2. A metal rod (measuring an inch) secured in a cement square-sticking upward from the ground (next to a main walkway). The findings for bent and damaged window screens: D. On 07/16/25 at 4:30 pm, observations in the courtyard between Building 2 and the Memory Care Unit revealed: 1. One (1) window in the Memory Care unit, Room 7 had a partially detached and bowed screen. 2. One (1) window in the Memory Care unit, Room 8 had a partially detached and bowed screen. 3. One (1) window in Building 2, Room 24A, had a tom screen. 4. One (1) window in Building 1, a kitchen window was detached and bowed. E. On 07/16/25 at 5:08 pm, the Executive Director confirmed observations of the cigarette butts located in the courtyard (between Building 1 & 2) and window screens (courtyard between Building 2 and Memory Care unit). On 07/17/25 at 10:51 am, the Executive Director confirmed the trash, wooden boards and mini refrigerator door and walkway hazards located west (exterior) of the building.	8 042	(7-16-25) Maintenance replaced the nail sticking out 7/16/25) Maintenance cut off the 1 inch metal rod sticking up. 7-16-25) Maintenance replaced and fixed all window screens that were missing or bent and enssured the all windows were sealed all around.	