

Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 2055	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 05/06/2025
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

BROOKDALE VALENCIA

300 VALENCIA DRIVE SE

ALBUQUERQUE, NM 87108

(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 05/06/25 for the state requirements of NMAC 8.370.14, Regulations for Assisted Living for Adults. Census: 33 Complaint intake [REDACTED] was investigated, and no deficiencies were cited. Complaint intake [REDACTED] was investigated, and no deficiencies were cited.	8 000		
8 047	8 NMAC 370.14.47 Lighting and Lighting Fixtures A. All areas of the facility, including storerooms, stairways, hallways, and interior and exterior entrances shall be lighted to make the area clearly visible. B. Exits, exit-access ways and other areas used at night by residents and staff shall be illuminated by night lights or other continuous lighting. C. Lighting fixtures shall be selected and located to accommodate the needs and activities of the residents, with the comfort and convenience of the residents in mind. D. Lamps and lighting fixtures shall be shaded to prevent glare to the eyes of residents and staff, and protected from accidental breakage or shattering. E. Facilities with four or more residents shall have emergency lighting to light exit passageways and the exterior area near the exits that activates automatically upon disruption of electrical service. F. Facilities with three or fewer residents shall have a flashlight that is immediately available for use in lieu of electrically interconnected emergency lighting. [8.370.14.47 NMAC - N, 7/1/2024]	8 047		

Health Improvement

Ellen O'Leary

Executive Director

1/7/2024

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8 047	Continued From page 1 This REQUIREMENT is not met as evidenced by: 8.370.14.47 E Based on observation and interview, the facility has failed to ensure for all resident that the emergency lights were in working order. This deficient practice could impede (delay or prevent) residents, staff and other occupants from safe evacuation of the facility if a fire or other emergency occurred and residents were not able to see to exit the building. The findings are: A. On 05/05/25 at 9:20 am, during observation and tour of assisted living building C, upon testing the facility's emergency lights, two (2) were found to be in non-working order. One (1) was on the first floor by the south exit, near apartment [REDACTED] and the second on the 3rd floor near the elevator, by apartment [REDACTED]. This indicated the emergency lights were not in working order. B. On 05/05/25 at 09:50 am, during an interview, the Executive Director confirmed the emergency lights on the 1st floor by the south exit, near apartment [REDACTED] and on the 3rd floor near the elevator, by apartment [REDACTED], did not turn on and were not in working order. 8 NMAC 370.14.63 Fire Extinguishers Fire extinguisher(s) must be located in the facility as approved by the state fire marshal or the fire	8 047	8.370.14.47E The Maintenance Director inspected all emergency lights and replaced all batteries. This was performed On the date of the survey. Completion Date: 05.06.25 and Ongoing Completed By: The Maintenance Director will perform Weekly inspections of each emergency light to ensure that they remain in good working order.	
8 063		8 063		

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8 063	Continued From page 2 prevention authority with jurisdiction. A. Facilities must as a minimum have two 2A10BC fire extinguishers: (1) one extinguisher located in the kitchen or food preparation area; (2) one extinguisher centrally located in the facility; (3) all fire extinguishers shall be inspected yearly and recharged as needed; all fire extinguishers must be tagged noting the date of the inspection; (4) the maximum distance between fire extinguishers shall be 50 feet. B. Fire extinguishers, alarm systems, automatic detection equipment and other firefighting equipment shall be properly maintained and inspected as recommended by the manufacturer, state fire marshal, or the local fire authority. [8.370.14.63 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.63 B Reference NAPA 10, Standard for Portable Fire Extinguishers, 1998 Edition: 4-3 Inspection. 4-3.1* Frequency. Fire extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals. Fire extinguishers shall be inspected at more frequent intervals when circumstances require. Based on observation and interview, the facility failed to ensure the fire extinguishers were being inspected monthly as recommended by the manufacturer. This deficient practice could likely result in residents, staff members, and other building	8 063		

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8 063	Continued From page 3 occupants to be at risk of harm, injury, or death if a fire were to occur and the fire extinguishers did not work. The findings are: A. On 05/05/25 at 10:02 am, during observation of the facility's fire extinguishers, two (2) fire extinguishers had not been inspected monthly as recommended by the manufacturer. One (1) located near the north hallway exit door and the second near the south hallway exit between rooms [REDACTED]. The two (2) fire extinguisher's tags were last punched on January 2025 and March 2025. B. On 05/05/25 at 10:20 am, during an interview, the Executive Director confirmed the respective fire extinguishers in the facility had not been inspected monthly since January and March 2025.	8 063	8.370.14.63 B The Maintenance Director inspected each fire Extinguisher on the day the survey to ensure that each Extinguisher was in good working order and that all of the Punch cards were up to date. Completion Date: 05.06.25 and ongoing Completed By: The Maintenance Director will perform Monthly inspections of each of the fire extinguishers to Ensure that all are in good working order and that the Punch cards are up to date.	