PRINTED: 03/27/2025
FORM APPROVED

Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	4003	A. BUILDING: ______ B. WING ______	C 03/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEIGHBORHOOD IN RIO RANCHO (THE)	900 LOMA COLORADO BLVD NE RIO RANCHO, NM 87124

(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 03/19/25 for the state requirements of NMAC 8.370.14, Regulations for Assisted Living for Adults. Census: 27 Complaint intake [redacted] as investigated with no deficiencies cited.	8 000	An inspection of all storage areas in Assisted Living has been completed by the Housekeeping Manager/Designee and all chemicals and cleaning supplies have been placed in a secured room or cabinet. The Housekeeping Manager/Designee will inspect all storage closets in Assisted Living weekly to make sure all chemicals are secure. Results of the weekly inspections will be presented at the monthly Safety Meeting by the Housekeeping Manager/Designee for two months.	3/31/25
8 037	8 NMAC 370.14.37 Laundry Services A. General requirements: The facility shall provide laundry services for the residents, either on the premises or through a commercial laundry and linen service. (1) On-site laundry facilities shall be located in areas separate from the resident units and shall be provided with necessary washing and drying equipment. (2) Soiled laundry shall be kept separate from clean laundry, unless the laundry facility is provided for resident use only. (3) Staff shall handle, store, process and transport linens with care to prevent the spread of infectious and communicable disease. (4) Soiled laundry shall not be stored in the kitchen or dining areas. The building design and layout shall ensure the separation of laundry room from kitchen and dining areas. An exterior route to the laundry room is not an acceptable alternative, unless it is completely enclosed. (5) In new construction or newly licensed facilities with more than 15 residents, washers shall be in separate rooms from dryers. The rooms with washers shall have negative air pressure from the other facility rooms. (6) All linens shall be changed as needed and at least weekly or when a new resident is to occupy	8 037		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Sharon Lorrie

TITLE: Administrator

(X6) DATE: 3-28-25

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8 037	Continued From page 1 the bed. (7) The mattress pad, blankets and bedspread shall be laundered as needed and at least once per month or when a new resident is to occupy the bed. (8) Bath linens consisting of hand towel, bath towel and washcloth shall be changed as needed and at least weekly. (9) There shall be a clean, dry, well ventilated storage area provided for clean linen. (10) Facility laundry supplies and cleaning supplies shall not be kept in the same storage areas used for the storage of foods and clean storage and shall be kept in a secured room or cabinet. B. Residents may do their own laundry, if it is their preference and they are capable of doing so, or if it is part of their skill-building for independent living and is documented as part of their ISP. [8.370.14.37 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.37 A (10) Based on observation and interview, the facility failed to ensure cleaning supplies and hazardous chemicals (any chemical which can cause a physical or health hazard) were stored in secured areas and were not accessible to the residents. This deficient practice could likely result in residents to be at risk of harm, illness, or injury if the residents were to spill or ingest (take food, drink, or another substance in the body by swallowing or absorbing it) cleaning supplies or hazardous chemicals. The findings are:	8 037		

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8 037	Continued From page 2 A. On 03/18/25 at 10:22 am during an observation of the facility's fourth (4th) floor custodian closet, the following chemicals were unsecured and accessible to residents: 1. One (1) 2.5 liter container of concentrated disinfectant cleaner. 2. One (1) 32 ounce (oz.) spray bottle of bleach. 3. Two (2) 32 oz. spray bottles of glass and surface cleaner. 4. One (1) one quart spray bottle of furniture polish. 5. One (1) one quart bottle of cream cleanser (mildly abrasive cleaner used for the removal of soils on washable surfaces). B. On 03/18/25 at 11:11 am, during an interview, the Nurse Manger confirmed the fourth (4th) floor custodian closet was unsecured and the chemicals inside were accessible to residents.	8 037		
8 063	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 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	8 063	All of the fire extinguishers in Assisted Living have been inspected and inspection dates have been written on the tags on the extinguishers by the Plant Operations Manager/Designee.	

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8 063	Continued From page 3 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 A (3) B Reference NFPA 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 inspected monthly as recommended by the manufacturer. This deficient practice could likely result in residents, staff members, and other building 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 03/18/25 at 10:30 am during an observation of the facility's fire extinguishers, the facility's ten (10) fire extinguishers were not inspected monthly as recommended by the manufacturer. The extinguishers had an annual inspection in January 2025 and shoud have had a monthly inspection starting in February.	8 063	The Plant Operations Manager/Designee will inspect the fire extinguishers monthly and make sure that the date for the month is written on the tag for each extinguisher. Any issues with inspecting fire extinguishers will be discussed monthly at the Safety Meeting by the Plant Operations Manager/Designee.	3/31/25

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8 063	Continued From page 4 B. On 03/18/25 at 11:05 am during an interview, the facility's Maintenance Technician confirmed the fire extinguishers had not been inspected for February 2025.	8 063		