Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	2227	A. BUILDING: _____ B. WING _____	12/11/2014

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PALMILLA SENIOR LIVING	10301 GOLF COURSE RD ALBUQUERQUE, NM 87114

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A 000	Initial Comments An initial survey was completed on 12/11/14 for the state requirements of 7 NMAC 8.2, Regulations for Assisted Living. Deficiencies were cited as result of the survey.	A 000		
A 017	7 NMAC 8.2.17 Staff Training STAFF TRAINING: A. Training and orientation for each new employee and volunteer that provides direct care shall include a minimum of sixteen (16) hours of supervised training prior to providing unsupervised care for residents. B. Documentation of orientation and subsequent trainings shall be kept in the personnel file at the facility. C. Training shall be provided at orientation and at least twelve (12) hours annually, the orientation, training and proof of competency shall include: (1) fire safety and evacuation training; (2) first aid; (3) safe food handling practices (for persons involved in food preparation), to include: (a) instructions in proper storage; (b) preparation and serving of food; (c) safety in food handling; (d) appropriate personal hygiene; and (e) infectious and communicable disease control; (4) confidentiality of records and resident information; (5) infection control; (6) resident rights; (7) reporting requirements for abuse, neglect or exploitation in accordance with 7.1.13 NMAC; (8) smoking policy for staff, residents and visitors; (9) methods to provide quality resident care; (10) emergency procedures; (11) medication assistance, including the certificate of training for staff that assist with	A 017		

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HEALTH FACILITY LICENSING & CERTIFICATION BUREAU

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A 017	Continued From page 1 medication delivery; and (12) the proper way to implement a resident ISP for staff that assist with ISPs. D. If a facility provides transportation to residents, employees of the facility who drive vehicles and transport residents shall have training in transportation safety for the elderly and disabled, including safe vehicle operation. [7.8.2.17 NMAC - Rp, 7.8.2.17 NMAC, 01/15/2010] This REQUIREMENT is not met as evidenced by: Refer to 7.8.2.17 C. (2), (3), (4), (5), & (6). Based on record review and staff interview, the facility failed to ensure that employees have 12 hours of annual in-service training that shall include; 1) first aid, 2) safe food handling, 3) confidentiality, 4) infection control, and 5) resident rights. Record review indicated that 3 of 3 caregivers (#s 83, 84, and 86) that had been employed at the facility for greater than a year had not been educated during the past year on the previously mentioned areas. This failed practice could lead to inadvertent harm to all 72 residents by the staff. The findings are: A. Review of Caregiver #83's in-service trainings revealed that they did not have the following areas of training during the previous 12 months: 1. First Aid 2. Confidentiality 3. Infection Control 4. Resident Rights B. Review of Caregiver #84's in-service trainings revealed that they did not have the following areas of training during the previous 12 months:	A 017	This Citation will be corrected by providing initial and ongoing education and training to all team members including: 1.Training upon hire which includes a total of 12 hours of Spectra U (Spectrum 's online training system) and Spectrum's 8- hour new Team Member Orientation. 2.Five days of supervised preceptor training for a total of 40 hours. 3.Monthly training which will include specific diagnoses and diseases. In addition, all team members will receive annual training to address the training topics required by state regulation which will include: •Fire Safety and evacuation training •First aid •Safe food handling practices •Confidentially of records and residents information •Infection control •Residents rights •Reporting requirements for abuse, neglect or exploitation •Smoking policy for staff, residents and visitors •Methods to provide quality resident care •Emergency procedures •Medication assistance, including the certificate of training for staff that assists with medication delivery. •Proper way to implement a resident ISP for staff that assist with ISP's. A schedule has been established for training for all non-complaint team members to correct this deficiency. First training will take place on January 28, 2015, February 10, 2015 with a final training commencing on February 25,2015.	

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A 017	Continued From page 2 1. First Aid 2. Confidentiality 3. Infection Control 4. Resident Rights 5. Safe food handling C. Review of Caregiver #86's in-service trainings revealed that they did not have the following areas of training during the previous 12 months: 1. First Aid 2. Confidentiality 3. Infection Control 4. Resident Rights D. On 12/11/14 at 9:30 am, during an interview, the Executive Director confirmed that the staff did not have required trainings in the past 12 months.	A 017		
A 070	7 NMAC 8.2.70 Incorporated and Related Rules and Codes INCORPORATED AND RELATED RULES AND CODES: The facilities that are subject to this rule are also subject to other rules, codes and standards that may, from time to time, be amended. This includes the following: A. Health Facility Licensure Fees and Procedures, New Mexico Department of Health, 7.1.7 NMAC. B. Health Facility Sanctions and Civil Monetary Penalties, New Mexico Department of Health, 7.1.8 NMAC. C. Adjudicatory Hearings for Licensed Facilities, New Mexico Department of Health, 7.1.2 NMAC. D. Caregiver's Criminal History Screening Requirements, 7.1.9 NMAC. E. Employee Abuse Registry 7.1.12 NMAC. F. Incident Reporting, Intake Processing and Training Requirements 7.1.13 NMAC.	A 070		

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A 070	Continued From page 3 [7.8.2.70 NMAC - N, 01/15/2010] This REQUIREMENT is not met as evidenced by: 7.1.9.8 CAREGIVER AND HOSPITAL CAREGIVER EMPLOYMENT REQUIREMENTS: . . . D. Application: In order for a nationwide criminal history record to be obtained and processed, the following shall be submitted to the department on forms provided by the department. (1) A form containing personal identification which has a photograph of the person and which meets the requirements for employment eligibility in accordance with the immigration and nationality act as amended. A reasonable xerographic copy of a drivers license photograph will suffice under Subsection D of 7.1.9.8 NMAC. (2) A signed authorization for release of information form. (3) Three (3) complete sets of readable fingerprint cards or other department approved media acceptable to the department of public safety and the federal bureau of investigation submitted using black ink. (4) The fee specified by the department for the nationwide and statewide criminal history screening investigation shall not exceed seventy-four ($74) dollars. Of which, twenty-four ($24) dollars shall be applied for the federal bureau of investigation nationwide criminal history screening, seven ($7) dollars shall be applied for the statewide criminal history screening. The remaining application fee shall be applied to cover costs incurred by the Department to support activities required by the Act and these rules. The fees will not be applied to any other activity or expense undertaken by the	A 070		

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A 070	Continued From page 4 Department. . . . E. Fees: The federal bureau of investigation has a mandatory processing fee with no exceptions. The department and department of public safety impose a state processing and administrative fee. The fee payment must accompany the fingerprint application, or otherwise be credited to the department prior to or at the same time with the department's receipt of the application documents. The manner of payment of the fee is by bank cashier check or money order payable to the New Mexico department of health or other method of funds transfer acceptable to the department. Business checks will be accepted unless the business tendering the check has previously tendered a check to the department unsupported by sufficient funds. Neither cash nor personal checks will be accepted. The fee may be paid by the care provider or by the applicant , ceregiver or hospital caregiver. The department will set a fee in addition to the fees imposed by department of public safety and the federal bureau of investigation that will fully and completely cover costs incurred by the department to support activities required by the act and these rules. The fees will not be applied to any other activity or expense undertaken by the department. F. Timely Submission: Care providers shall submit all fees and pertinent application information for all individuals who meet the definition of an applicant, caregiver or hospital caregiver as described in Subsections B, D and K of 7.1.9.7 NMAC, no later than twenty (20) calendar days from the first day of employment or effective date of a contractual relationship with the care provider. G. Maintenance of Records: Care providers shall	A 070		

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A 070	Continued From page 5 maintain documentation relating to all employees and contractors evidencing compliance with the act and these rules. (1) During the term of employment, care providers shall maintain evidence of each applicant, caregiver or hospital caregiver's clearance, pending reconsideration, or disqualification. (2) Care providers shall maintain documented evidence showing the basis for any determination by the care provider that an employee or contractor performs job functions that do not fall within the scope of the requirement for nationwide or statewide criminal history screening. A memorandum in an employee's file stating "This employee does not provide direct care or have routine unsupervised physical or financial access to care recipients served by [name of care provider]," together with the employee's job description, shall suffice for record keeping purposes. Based on record review and interview, the facility failed to submit applications, copies of personal identification, signed authorization for release of information, three complete sets of readable fingerprint cards, and fees to the Caregiver Criminal History Screening Program (CCHSP) no later than 20 calendar days from the first day of employment for 2 (#86 and #87) of 9 (#81 through #89) Caregivers. This deficient practice could lead to a convicted felon to be employed at the facility and have physical access to all 72 (#1 through #72) vulnerable adults in the facility. The findings are: A. Review of records for Resident Assistant #86 revealed a date of hire of 08/05/13 and there was no evidence of fingerprinting or proof thet the required documents were sent to CCHSP at the	A 070		

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A 070	Continued From page 6 time of the survey. B. Review of records for Resident Assistant #87 revealed a date of hire of 10/15/14 and there was no evidence of fingerprinting or proof that the required documents were sent to CCHSP at the time of the survey. C. At the exit interview on 12/11/14 at 11:17 am, the Administrator acknowledged the facility had no documentation of fingerprinting or proof that the required documents were sent to CCHSP at the time of the survey. Refer to 7.1.12 EMPLOYEE ABUSE REGISTRY . . . 7.1.12.8 REGISTRY ESTABLISHED; PROVIDER INQUIRY REQUIRED: . . . A. Provider requirement to inquire of registry. A provider, prior to employing or contracting with an employee, shall inquire of the registry whether the individual under consideration for employment or contracting is listed on the registry. Based on Record review and interview, the facility failed to make inquiry to the Employee Abuse Registry for 7 (#81, #82, #83, #85, #87, #88, and #89) of 9 (#81 through #89) direct care staff records reviewed. This widespread deficient practice could lead to the facility hiring a direct care staff to provide care for the 72 (#1 through #72) residents in the facility when that individual has previously been placed on the Employee Abuse Registry for the abuse, neglect, and/or the exploitation of a person under their care. The findings are.	A 070		

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A 070	Continued From page 7 A. Review of records for Medication Assistant #81 revealed a date of hire of 06/16/14 and there was no record of inquiry to the Employee Abuse Registry. B. Review of records for Medication Assistant #82 revealed a date of hire of 05/22/14 and there was no record of inquiry to the Employee Abuse Registry. C. Review of records for Resident Assistant #83 revealed a date of hire 10/17/13 and there was no record of inquiry to the Employee Abuse Registry. D. Review of records for Resident Assistant #85 revealed a date of hire of 08/11/14 and there was no record of inquiry to the Employee Abuse Registry. E. Review of records for Resident Assistant #87 revealed a date of hire of 10/15/14 and there was no record of inquiry to the Employee Abuse Registry. F. Review of records for Housekeeper #88 revealed a date of hire of 07/21/14 and there was no record of inquiry to the Employee Abuse Registry. G. Review of records for Housekeeper #89 revealed a date of hire of 11/10/14 and there was no record of inquiry to the Employee Abuse Registry. H. At the exit interview on 12/11/14 at 11:17 am, the Administrator acknowledged the facility had no documentation of inquiry to the Employee Abuse Registry for direct care staff #81, #82, #83, #85, #87, #88, and #89.	A 070		

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