

Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 2262	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 01/27/2015
NAME OF PROVIDER OR SUPPLIER BEEHIVE HOMES OF FOUR HILLS I		STREET ADDRESS, CITY, STATE, ZIP CODE 13440 WENONAH SE ALBUQUERQUE, NM 87123		
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A 000	Initial Comments The following deficiencies were cited during a state licensure survey completed on 01/27/15 for the requirements for Residential Health Facilities, Assisted Living Facilities for Adults, 7 NMAC 8.2.	A 000	A- 017 All Facility Staff have received the Mandatory 16 hours of training required prior to Unsupervised Care. The Staff in question had not completed 16 hours of training but was not providing unsupervised care. To date ALL Staff have received the 16 hours of training.	
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 <i>Scanned 04-23-15 J.D. 2nd Set</i>	The Facility Administrator will perform random audits of staff files to ensure correct procedures are →	4/1/15

Division of Health Improvement

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

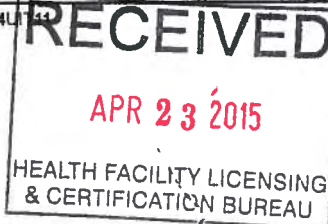
(X6) DATE

STATE FORM

8599

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If continuation sheet 1 of 10



Division of Health Improvement

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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: The following deficiency refers to paragraph 7.8.2.17A Based on observation and interview, the facility failed to ensure that 1 of 3 sampled caregivers (Caregiver #1) failed to complete 16 hours of supervised training prior to providing unsupervised care for the facility's 10 residents (#1, 2, 3, 4, 5, 6, 7, 8, 9 and 10). This deficient practice increases the potential for all 10 residents to be harmed, experience pain and discomfort, exposed to infections, or become ill. The findings are: A. Record review of Caregiver #1's training records, it was noted that Caregiver #1 had completed only 2 hours of initial training, fewer than the required 16 hours. B. On 01/27/15 at 11:45 am, during interview, the house manager verified that caregiver #1 had only completed confidentiality and abuse/neglect training and was performing her duties unsupervised.	A 017	Continued A 017 being followed now and in the future. Management has been trained on proper hiring procedures to ensure that <u>all</u> employees receive 16 hours of training prior to unsupervised care.	4/1/15

Division of Health Improvement

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A 027	Continued From page 2	A 027	A 027 AN Activities Calendar has Been Created. This Calendar is displayed in a public, accesible place. It has an activity planned for each day of the week. Activities have been organized since the home opened and documentation of those activities dates back to February 2615	4/1/15
A 027	7 NMAC 8.2.27 Resident Activities RESIDENT ACTIVITIES: Each facility shall provide or make available recreational and social activities appropriate to the residents' abilities that meet their psychosocial needs and are relevant to their social history; including a balance of cognitive, reminiscence, physical and social activities. The facility shall post the activities and encourage residents to participate. [7.8.2.27 NMAC - Rp, 7.8.2.28 NMAC, 01/15/2010] This REQUIREMENT is not met as evidenced by: Based on observation and interview, the facility failed to have an organized activities program or a posted activities calendar. This deficient practice increases the likelihood that the psychosocial needs of the facility's 10 residents (#1, 2, 3, 4, 5, 6, 7, 8, 9 and 10) will not be satisfied. The findings are: A. On 01/27/15 at 9:15 am, during observation, it was noted during a facility walk-through that no activity calendar was posted for resident review. B. On 01/27/15 at 9:25 am, during interview, the facility house manager stated that the facility had no activities director and no organized activities program.	A 027		
A 036	7 NMAC 8.2.36 Nutrition 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	A 036		

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A 036	Continued From page 3 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 (3) meals or their equivalent each day at regular times with no more than sixteen (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 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 (1) 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	A 036	Continued A-027 The activities Calendar and the proper posting of the Calendar is part of the random audit that is now in place. We will continuously monitor to ensure that the activities are improving and that the Calendar is posted	4/1/15

Division of Health Improvement

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A 036	Continued From page 4 residents to eat at a leisurely pace and to socialize; and (h) contact the resident's PCP within forty-eight (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; (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 thirty (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,	A 036	A-036 The Weekly Menu is posted in a public place where residents and family may see and review it. Also a menu of snacks offered to the residents has been placed in a public place. Posting of the menu will be monitored by our new Audit System that we	4/1/15

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A 036	Continued From page 5 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 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	A 036	Continued A-036 have put into Place. The Facility Manager has received additional training about the proper posting of meals and snacks.	4/1/15

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A 036	Continued From page 6 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, 7.6.2 NMAC. (1) The facility shall ensure that a minimum of a three (3) calendar day supply of perishables and a five (5) 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 (3) 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 thirty-five (35) - forty-one (41) degrees fahrenheit. (b) Freezer temperatures shall be maintained at zero (0) 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 (3) 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 one hundred forty (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	A 036		

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A 036	Continued From page 7 medication shall be used pursuant to Subsection B of 7.6.2.8 NMAC. (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 (6) 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 forty-one (41) degrees fahrenheit; (b) the temperature for all hot foods is maintained at one hundred forty (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. (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	A 036		

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A 036	Continued From page 8 disposal, treatment facilities and private wells. [7.8.2.36 NMAC - Rp, 7.8.2.37 NMAC, 01/15/2010] This REQUIREMENT is not met as evidenced by: The following deficiency refers to paragraph 7.8.2.36A(1)(d) Based on observation and interview, the facility failed to post a weekly menu, to include snacks, where residents and their family members were able to view it. This deficient practice could adversely affect the morale of the facility's 10 residents (#1, 2, 3, 4, 5, 6, 7, 8, 9, and 10) who like to know what foods they will be served each week. The findings are: A. On 01/27/15 at 9:15 am, during observation, it was noted during a facility walk-through that no weekly schedule of meals and snacks was posted. B. On 01/27/15 at 9:25 am, during interview, the facility house manager verified that a weekly menu was not posted.	A 036		
A 065	7 NMAC 8.2.65 Fire Drills FIRE DRILLS: All facilities shall conduct monthly fire drills which are to be documented. A. There shall be at least one (1) documented fire drill per month and at a minimum, one documented fire drill each eight (8) hours (day, evening, night) per quarter that employs the use of the fire alarm system or the detector system in the facility.	A 065		

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A 065	Continued From page 9 B. A record of the monthly fire drills shall be maintained on file in the facility and readily available. Fire drill records shall show: (1) the date of the drill; (2) the time of the drill; (3) the number of staff participating in the drill; (4) any problem noted during the drill; and (5) the evacuation time in total minutes. C. If applicable, the local fire department may be requested to supervise and participate in fire drills. [7.8.2.65 NMAC - Rp, 7.8.2.63 NMAC, 01/15/2010] This REQUIREMENT is not met as evidenced by: This deficiency refers to paragraph 7.8.2.65A Based on interview, the facility failed to maintain documented evidence of fire drills. This deficient practice had the potential to affect the residents' ability to react in a manner that would ensure safe exit from the building in case of fire, presenting a risk of harm to all 10 facility residents (#1, 2, 3, 4, 5, 6, 7, 8, 9 and 10). The findings are: A. On 01/27/15 at 9:55 am, during interview, the facility house manager stated that facility fire drills had been conducted but that there was no documentation to verify her statement.	A 065	A-065 Fire drills have Been Conducted and Documented These fire drills have been conducted since date of opening but they are now being properly documented. Fire Drills and the Documentation of them will be monitored during the Random Audits.	4/1/15