PRINTED: 12/03/2014
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
	2256	A. BUILDING: _____ B. WING _____	11/21/2014

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RETREAT GARDENS	4100 JACKIE RD SE 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
A 000	Initial Comments An Initial Licensing Survey was completed 11/21/14 for the state requirements of 7 NMAC 8.2, Regulations for Assisted Living. A deficiency was cited as a result of the survey.	A 000	Scanned 12-30-14 J.D.	
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	A 017	The Retreat Gardens is committed to the ongoing training of all employees and has been successful in providing all employees the required orientation by exceeding the required 12 hrs of orientation with 16 hours of supervised orientation. All staff have also been consistently provided with 12 hours of annual education meeting the required areas plus an additional 12 hrs of dementia specific education. Based on previous surveyor's acceptance, the facility did not provide first aid to new employees who provide resident care since the	12/15/14

HEALTH FACILITY LICENSING & CERTIFICATION BUREAU
RECEIVED
DEC 29 2014

Division of Health Improvement
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Jesse Smith Grant PhD — TITLE: Administrator — (X6) DATE: 12-10-14

PRINTED: 12/03/2014
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
	2266	A. BUILDING: _____ B. WING _____	11/21/2014

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RETREAT GARDENS	4100 JACKIE RD SE 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
A 017	Continued From page 1 certificate of training for staff that assist with 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) Based on record review and interview, the facility failed to have first aid training for 6 of 6 (#55 through #60) direct care staff that provide care for the facility 39 (#1 through #39) residents. This deficient practice could lead to residents not receiving immediate first aid in an emergency. The findings are: A. Review of records for direct care staff #55 through #60 revealed no record of first aid training. B. In an interview with the Director of Operations on 11/20/14 at 2:00 pm, she acknowledged that direct care staff #55 through #60 did not receive first aid training. C. In an interview with the Administrator on 11/21/14 at 11:00 am, she acknowledged that direct care staff #55 through #60 did not receive first aid training.	A 017	facility is staffed with licensed nurses 24 hrs a day, 7 days a week. There are always 2-4 nurses available to the residents for care, first aid and emergency assessment in addition to the direct care staff. The facility policy on emergency care and first aid call for a Licensed nurse to provide this level of care to residents. Although this has been the accepted practice the facility will meet the requirement by providing first aid training to all care assistants by having all care assistants attend an annual first aid training. The first aid training curriculum was	

Cgt
12/10/14

PRINTED: 12/03/2014
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
	2256	A. BUILDING: _____ B. WING _____	11/21/2014

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RETREAT GARDENS	4100 JACKIE RD SE 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
A 017	Continued From page 1 certificate of training for staff that assist with 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) Based on record review and interview, the facility failed to have first aid training for 6 of 6 (#55 through #60) direct care staff that provide care for the facility 39 (#1 through #39) residents. This deficient practice could lead to residents not receiving immediate first aid in an emergency. The findings are: A. Review of records for direct care staff #55 through #60 revealed no record of first aid training. B. In an interview with the Director of Operations on 11/20/14 at 2:00 pm, she acknowledged that direct care staff #55 through #60 did not receive first aid training. C. In an interview with the Administrator on 11/21/14 at 11:00 am, she acknowledged that direct care staff #55 through #60 did not receive first aid training.	A 017	written and approved by the facility's nurse educator (RN) as designated by the NM Board of Nursing. The facility immediately began the curriculum development and training immediately following the exit interview on 11/21/14. The facility will 1) Have all care assistants complete the first aide training taught by a licensed nurse by 12/15/14. 2) The training will be annual for all care assistants and the approved curriculum taught by a license nurse. 3) The training will be provided to all new employees during orientation. 4) The facility will add "first aid" to the list of required topics	12/15/14 LGE

PRINTED: 12/03/2014
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
	2256	A. BUILDING: _____ B. WING _____	11/21/2014

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RETREAT GARDENS	4100 JACKIE RD SE 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
A 017	Continued From page 1 certificate of training for staff that assist with 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) Based on record review and interview, the facility failed to have first aid training for 6 of 6 (#55 through #60) direct care staff that provide care for the facility 39 (#1 through #39) residents. This deficient practice could lead to residents not receiving immediate first aid in an emergency. The findings are: A. Review of records for direct care staff #55 through #60 revealed no record of first aid training. B. In an interview with the Director of Operations on 11/20/14 at 2:00 pm, she acknowledged that direct care staff #55 through #60 did not receive first aid training. C. In an interview with the Administrator on 11/21/14 at 11:00 am, she acknowledged that direct care staff #55 through #60 did not receive first aid training.	A 017	to the current yearly education calendar. The RN Nurse Educator will be responsible for a yearly audit of the first aid curriculum and the human resources coordinator will add first aid training to the audit currently completed on day 14 for all new employees. The human resource coordinator currently audits all employee files every six months for compliance with education and has added "first aid" to that standing audit. The facility will continue to use licensed nurses 24 hrs a day, 7 days a week for ongoing assessment and emergency service but has now added first aid training for all care assistants as an additional means of providing quality care.	

2.4