Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	2183	A. BUILDING _____ B. WING _____	04/12/2011

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BEEHIVE HOMES OF ENCHANTED HILLS	6336 ENCHANTED HILLS BLVD RIO RANCHO, NM 87144

(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	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 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,	A 017	Scanned 8/08/11 mc	

RECEIVED AUG 2011 HEALTH FACILITY LICENSING & CERTIFICATION BUREAU

Division of Health Improvement

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Administrator — (X6) DATE: 7/26/2011

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A 017	Continued From page 1 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 - Staff Training Based on record review and interview, the facility failed to ensure that 1 caregiver had updated annual training, as required for 1 of 3 caregivers (Caregiver #1, Caregiver #2 and Caregiver #3). The findings are: A. On 04/11/11 at 12:30 pm, during review of employee records, it was noted that Caregiver #1 had outdated trainings documented in the training file. Documentation indicated that the Abuse/Neglect Training was dated 11/2009, First Aid was dated 6/2008, Food Handling was dated 11/2008, Infection Control was dated 2009, and Resident's Rights dated 6/2009. B. On 04/11/11 at 12:45 pm, during an interview, the Manager confirmed that the training was more than one year old.	A 017	7.8.2.17 An Internal Audit of staff training Files will be conducted. Any staff member lacking training, or has expired training will receive updated training. A future violation of staff training will be prevented by creating and ~~maintting~~ maintaining a staff training Schedule. This violation will be corrected by 8/20/2011.	
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	A 070		

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A 070	Continued From page 2 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. [7.8.2.70 NMAC - N, 01/15/2010] This REQUIREMENT is not met as evidenced by: Refer to NMAC 7.1.9.8 - Caregivers Criminal History Screening Requirements (Effective January 1, 2006) - All applicants to whom an offer of employment is made must consent to a nationwide and statewide screening. Based on observations, record review and interview, the facility failed to have documentation that direct care staff had been cleared through the New Mexico Caregivers' Criminal History Screening Program (CCHSP) for 3 employees (Caregiver #1, Caregiver #2, Caregiver #3) who was hired to be a caregiver to residents of the facility, as required. The findings are: A. On 04/11/11 at 11:30 am, during review of employee records, it was noted that Caregiver #1, with a hire date of 01/07/11 and who was currently employed by the facility did not have on file documentation of CCHSP nationwide (full) or statewide (partial) screening clearance letter addressed to the current facility of employment and conducted subsequent to hire within the required timeframes. Similarly, Caregiver #2, with a hire date of 01/20/11 and who was	A 070	7.1.9.8 An internal Audit of employee clearance letters will be conducted. All staff will be required to have a clearance letter addressed to the facility. Employees who work at the facility as their principle place of employment will receive a full Screening. Employees who already have a full Screening but work part time at this facility will receive a partial, or State Screening. This	

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A 070	Continued From page 3 currently employed by the facility did not have on file documentation of CCHSP nationwide or statewide screening clearance letter addressed to the current facility of employment and conducted subsequent to hire within the required timeframes. Finally, Caregiver #3, with a hire date of 11/04/09 and who was currently employed by the facility did not have on file documentation of CCHSP nationwide or statewide screening clearance letter addressed to the current facility of employment and conducted subsequent to hire within the required timeframes. B. On 04/11/11 at 1:30 pm, the Manager acknowledged that Caregiver #1, Caregiver #2, and Caregiver #3 did not have a clearance letter from CCHSP on file at the facility with the current facility's address indicating a current nationwide or statewide screening.	A 070	Violation will be corrected by 8/5/2011 The facility will continue to do partial Screening for staff working in multiple beehive locations.	

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