

Division of Health Improvement

STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

2137

(X2) MULTIPLE CONSTRUCTION

A. BUILDING: _____

B. WING: _____

(X3) DATE SURVEY
COMPLETED

C

05/02/2025

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

LIFE SPIRE ASSISTED LIVING

9151 HIGH ASSETS WAY NW
ALBUQUERQUE, NM 87120

(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 05/02/25 for the
state requirements of NMAC 8.370.14,
Regulations for Assisted Living Facilities for
Adults.

Resident Census: [REDACTED]

Complaint Intake NM [REDACTED] was investigated
and deficiencies were not cited.

8 000

8 016 8 NMAC 370.14.16 Staff Qualifications

A facility shall employ staff with the following
qualifications.

A. Administrator, director, operator: an assisted
living facility shall be supervised by a full-time
administrator. Multiple facilities that are located
within a 40-mile radius may have one full-time
administrator. The administrator shall:

- (1) be at least 21 years of age;
- (2) have a high school diploma or its equivalent;
- (3) comply with the requirements of the New
Mexico caregivers criminal history screening act,
8.370.5 NMAC;
- (4) complete a state approved certification
program for assisted living administrators;
- (5) be able to communicate with the residents in
the language spoken by the majority of the
residents;
- (6) not work while under the influence of alcohol
or illegal drugs;
- (7) have evidence of education and experience to
prove the ability to administer, direct and operate
an assisted living facility; the evidence of
education and experience shall be directly related
to the services that are provided at the facility;
- (8) provide three notarized letters of reference
from persons unrelated to the applicant; and

8 016

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

Charles H. [Signature] TITLE

TITLE

Admini

(X6) DATE

5/19/2025

STATE FORM

8899

X93T11

If continuation sheet 1 of 8

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ALBUQUERQUE, NM 87120**

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8 016	Continued From page 1 (9) comply with the pre-employment requirements pursuant to the employee abuse registry, 8.370.8 NMAC. B. Direct care staff: (1) shall be at least 16 years of age; (2) shall have adequate education, relevant training, or experience to provide for the needs of the residents; (3) shall comply with the pre-employment requirements pursuant to the Employee Abuse Registry, 8.370.8 NMAC; and (4) shall comply with the current requirements of reporting and investigating incidents pursuant to incident reporting, intake processing and training requirements, 8.370.9 NMAC; (5) if a facility provides transportation for residents, the employees of the facility who drive vehicles and transport residents shall have copies of the following documents on file at the facility: (a) a valid New Mexico driver's license with the appropriate classification for the vehicle that is used to transport residents; (b) documentation of training in transportation safety for the elderly and disabled, including safe vehicle operation; (c) proof of insurance; and (d) documentation of a clean driving record; (6) any person who provides direct care who is not employed by an agency that is covered by the requirements of the caregivers criminal history screening requirements, 8.370.5 NMAC, shall provide current (within the last 6 months) proof of the caregiver's criminal history screening to the facility; the facility shall maintain and have proof of such screening readily available; and (7) employers shall comply with the requirements of the caregivers criminal history screening requirements, 8.370.5 NMAC.	8 016		

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8 016	Continued From page 2 [8.370.14.16 NMAC - N, 7/1/2024] This REQUIREMENT is not met as evidenced by: 8.370.14.16 B(7) REFER TO: 8.370.5.9 CAREGIVERS OR HOSPITAL CAREGIVERS AND APPLICANTS WITH DISQUALIFYING CONVICTIONS: A. Prohibition on employment: A care provider shall not hire or continue the employment or contractual services of any applicant, caregiver or hospital caregiver for whom the care provider has received notice of a disqualifying conviction, except as provided in Subsection B of this section. (1) In cases where the criminal history record lists an arrest for a crime that would constitute a disqualifying conviction and no final disposition is listed for the arrest, the authority will attempt to notify the applicant, caregiver or hospital caregiver and request information from the applicant, caregiver or hospital caregiver within timelines set forth in the authority 's notice regarding the final disposition of the arrest. Information requested by the authority may be evidence, for example, a certified copy of an acquittal, dismissal or conviction of a lesser included crime. (2) An applicant's, caregiver's or hospital caregiver's failure to respond within the required timelines regarding the final disposition of the arrest for a crime that would constitute a disqualifying conviction shall result in the applicant's, caregiver's or hospital caregiver's temporary disqualification from employment as a caregiver or hospital caregiver pending written documentation submitted to the authority evidencing the final disposition of the arrest. Information submitted to the authority may be	8 016			

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8 016	Continued From page 3 evidence, for example, of the certified copy of an acquittal, dismissal or conviction of a lesser included crime. In instances where the applicant, caregiver or hospital caregiver has failed to respond within the required timelines the authority shall provide notice by mail or electronic communication that an employment clearance has not been granted. The care provider shall then follow the procedure of Subsection A of 8.370.5.9 NMAC. (3) The authority will not make a final determination for an applicant, caregiver or hospital caregiver with a pending potentially disqualifying conviction for which no final disposition has been made. In instances of a pending potentially disqualifying conviction for which no final disposition has been made, the authority shall notify the care provider, applicant, caregiver or hospital caregiver by mail or electronic communication that an employment clearance has not been granted. The care provider shall then follow the procedure of Subsection A of 8.370.5.9 NMAC. B. Employment pending reconsideration determination: At the discretion of the care provider, an applicant, caregiver or hospital caregiver whose nationwide criminal history record reflects a disqualifying conviction and who has requested administrative reconsideration may continue conditional supervised employment pending a determination on reconsideration. C. Notice of final determination of disqualification: Upon receipt of a notice of final determination of disqualification a care provider shall: (1) immediately and permanently remove an applicant, caregiver or hospital caregiver from any position of employment that meets the definition of an applicant, caregiver or hospital caregiver as set forth in Subsections D	8 016	8 016 Life Spire will assure that any caregiver whose nationwide criminal history record reflects a disqualifying conviction and who has requested administrative reconsideration will continue conditional supervised employment pending a determination on reconsideration but will not be allowed to work a shift alone. Compliance Officer/House Manager will monitor shift schedules of employee under reconsideration until final clearance has been obtained to assure that they are not on schedule alone. Records clerk and HR will assure that a copy of the reconsideration is received within in 14 days or the employee will be terminated despite being in the process.	05/02/25

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8 016	Continued From page 4 and K of 8.370.5.7 NMAC; and (2) notify the authority by letter within 14 calendar days, as determined by the postmark, of the date and type of action taken to satisfy the removal requirements of as set forth in Paragraph (1) of Subsection C of this section via written documentation signed by an authorized agent of the care provider. [8.370.5.9 NMAC - N, 7/1/2024; A, 01/28/2025] Based on record review and interview, the facility failed to ensure for one (1) (Direct Care Staff [DCS] #2) of four (DCS #'s 1-4) staff members whose files were reviewed for compliance was cleared for employment by the Caregiver Criminal History Screening Program (CCHSP), and did not provided supervised care to residents while having a disqualifying conviction, and was terminated within 14 days of notification of disqualification. These deficient practices could affect residents by receiving improper care from a staff member that has not been cleared of criminal history. The findings are: A. On 04/30/25 at 8:15 am, record review of DCS #2's staff file revealed the following: 1. Date of hire 08/30/24. 2. CCHSP final determination letters dated 08/30/24 and 11/22/24 show: DCS #2 had a disqualifying conviction that prevents her employment as a caregiver and if a reconsideration request is not submitted within fourteen (14) days of date of letter, the employee must be terminated. The employee may provide supervised care while reconsideration is requested at the facility's discretion. 3. No request for reconsideration for	8 016			

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8 016	Continued From page 5 clearance after final determination letter dated 08/30/24. 4. A request for reconsideration for clearance dated 12/05/24. B. On 05/02/25 at 10:36 am during an interview, the facility's Compliance Officer confirmed the following: 1. DCS #2 provided unsupervised resident care from the start of employment and was never taken off the floor. 2. The reconsideration request was submitted on 12/05/24 and was approved on 12/06/24. C. On 05/06/25 at 12:56 pm during an interview, DCS #2 confirmed she began providing unsupervised resident care on 09/01/24 or 09/02/24 and she was the only staff member in the facility during overnight shifts twice a week since the start of her employment.	8 016		
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	8 037	8 037 Life Spire will assure that laundry and cleaning supplies are kept in a safe storage area by assuring that the locking mechanism on the key pad door is locked and engaged so that the passcode is required and the door does not allow free entry. Staff will be retrained not to disengage locking mechanism for easy entry. House Manager and Maintenance will complete 2 hour checks to assure doors are locked.	5/2/25

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8 037	Continued From page 6 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 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	8 037			

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STATE FORM

6399

X93T11

If continuation sheet 7 of 8

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8 037	Continued From page 7 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: A. On 04/29/25 at 9:00 am during an observation of the facility's laundry room, the following chemicals were unsecured and accessible to residents: 1. Two (2) one-gallon bottles of liquid bleach. 2. One (1) 180 fluid ounce (fl oz) bottle of concentrated bleach. 3. One (1) 32 fl oz spray bottle of foaming mold and mildew stain remover. 4. One (1) 19 ounce spray can of disinfectant spray. 5. Two (2) 24 fl oz containers of toilet bowl cleaner with bleach. 6. One (2) 32 fl oz spray bottle of liquid cleaner with bleach. 7. One (1) 60 fl oz bottle of liquid multi-surface cleaner. B. On 04/29/25 at 9:32 am, during an interview, the Maintenance Technician confirmed the laundry room door was unsecured and the chemicals inside were accessible to residents.	8 037		