

Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 5831	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/05/2023
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NAME OF PROVIDER OR SUPPLIER WESTWIND HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 6600 LOS VOLCANES NW ALBUQUERQUE, NM 87121
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A 000	<p>Initial Comments</p> <p>The following deficiencies were cited during a Full-Onsite/Complaint survey completed on 06/05/23 for the state requirements of 7 NMAC 8.2, Regulations for Assisted Living Facilities for Adults.</p> <p>Census (41)</p> <p>Complaint Intake NM46249 was investigated with no deficiencies cited.</p> <p>Complaint Intake NM53779 was investigated with no deficiencies cited.</p> <p>Complaint Intake NM60414 was investigated with no deficiencies cited.</p> <p>Complaint Intake NM64851 was investigated with no deficiencies cited.</p>	A 000	<p>This Plan of Correction is provided to assure resident safety and quality of care, and to meet regulatory requirements. It does not necessarily indicate admission or agreement with the survey conclusions or facts cited, and is not intended to establish a standard of care.</p>	
A 036	<p>7 NMAC 8.2.36 Nutrition</p> <p>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 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.</p> <p>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.</p> <p>(1) Meal service. The facility shall:</p> <p>(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</p>	A 036	<p>Posting of Snacks on daily menu.</p> <p>The available snacks have been posted along with the daily menu starting 6/5/23 and continuing. The Food Service Manager has been instructed to post the snacks on an on-going basis, and the Administrator will inspect weekly to assure the posting requirement is met.</p>	06/05/2023

Division of Health Improvement
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Maria FR Duarte

TITLE

Executive Director

(X6) DATE

06/30/23

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A 036	<p>Continued From page 1</p> <p>meal and morning meal with snacks freely available;</p> <p>(b) provide snacks of nourishing quality and post on the daily menu;</p> <p>(c) develop menus enjoyed by the residents and served at normal intervals appropriate to the residents ' preferences;</p> <p>(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;</p> <p>(e) have special menus or meal items following guidelines from the resident ' s physician for residents who have medically prescribed special diets;</p> <p>(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;</p> <p>(g) allow sufficient time for meals to enable residents to eat at a leisurely pace and to socialize; and</p> <p>(h) contact the resident ' s PCP within forty-eight (48) hours if a resident consistently refuses to eat.</p> <p>(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:</p> <p>(a) instruction in proper food storage;</p> <p>(b) preparation and serving food;</p> <p>(c) safety in food handling;</p> <p>(d) appropriate personal hygiene; and</p> <p>(e) infectious and communicable disease control.</p> <p>B. Dietary records. The facility shall maintain the following documentation onsite:</p>	A 036		

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A 036	<p>Continued From page 2</p> <p>(1) a systematic record of all menus and revisions, including snacks, for a minimum of thirty (30) calendar days;</p> <p>(2) a systematic record of therapeutic diets as prescribed by a PCP;</p> <p>(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</p> <p>(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.</p> <p>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.</p> <p>(1) Kitchen sanitation.</p> <p>(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, impervious material free of open seams, not readily corrodible and easily accessible for cleaning.</p> <p>(b) Utensils shall be stored in a clean, dry place protected from contamination.</p> <p>(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.</p> <p>(2) Washing and sanitizing kitchenware.</p> <p>(a) All reusable tableware and kitchenware shall be cleaned in accordance with procedures that include separate steps for prewashing, washing, rinsing and sanitizing.</p> <p>(b) Proper dishwashing procedures and techniques shall be utilized and understood by the dishwashing staff.</p>	A 036		

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A 036	<p>Continued From page 3</p> <p>(c) Periodic monitoring of the operation of the detergent dispenser, washing, rinsing and sanitizing temperatures shall be performed and documented.</p> <p>(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.</p> <p>(3) Sinks for hand washing shall include hot and cold running water, hand-washing soap and disposable towels.</p> <p>(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.</p> <p>(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 accordance with the local health authority. Disposable gloves shall be used in accordance with the local health authority.</p> <p>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.</p> <p>(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.</p> <p>(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</p>	A 036		

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A 036	<p>Continued From page 4</p> <p>the warmest section of the refrigerator and freezer and shall be accessible and easily read.</p> <p>(a) The temperature of the refrigerator shall be thirty-five (35) - forty-one (41) degrees fahrenheit.</p> <p>(b) Freezer temperatures shall be maintained at zero (0) degrees fahrenheit or below.</p> <p>(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.</p> <p>(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.</p> <p>(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 medication shall be used pursuant to Subsection B of 7.6.2.8 NMAC.</p> <p>(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.</p> <p>(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.</p> <p>(8) The facility shall ensure the following:</p> <p>(a) all perishable food is refrigerated and the temperature is maintained no higher than forty-one (41) degrees fahrenheit;</p>	A 036		

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A 036	<p>Continued From page 5</p> <p>(b) the temperature for all hot foods is maintained at one hundred forty (140) degrees fahrenheit; and</p> <p>(c) all displayed or transported food is protected from environmental contamination and maintained at proper temperatures in clean containers, cabinets or serving carts.</p> <p>E. Milk.</p> <p>(1) Raw milk shall not be used.</p> <p>(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.</p> <p>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 disposal, treatment facilities and private wells. [7.8.2.36 NMAC - Rp, 7.8.2.37 NMAC, 01/15/2010]</p> <p>This REQUIREMENT is not met as evidenced by: 7.8.2.36 A (d)</p> <p>Based on observation, record review, and interview, the facility failed to ensure that snacks were posted on the daily menu.</p> <p>This deficient practice could likely cause the 41 (R #s 1-41) residents listed on the census provided by the Administrator on 05/31/23, to be</p>	A 036		

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A 036	Continued From page 6 at risk for harm, if they do not know if, when, and what snacks of nourishing quality are available. The findings are: A. On 05/31/23 at 8:28 am, during observation of the facility's dining room, the posted daily menu did not include available snacks. B. On 05/31/23 at 12:59 pm, record review of the facility's printed monthly menu for May 2023, revealed it did not include snacks. C. On 06/01/23 at 2:07 pm, during an interview with the Administrator, she confirmed that the monthly menu and posted daily menu did not list available snacks.	A 036		
A 038	7 NMAC 8.2.38 Housekeeping Services HOUSEKEEPING SERVICES. The facility shall maintain the interior and exterior of the facility in a safe, clean, orderly and attractive manner. The facility shall be free from offensive odors, safety hazards, insects and rodents and accumulations of dirt, rubbish and dust. A. All common living areas and all bathrooms shall be cleaned as often as necessary to maintain a clean and sanitary environment. B. Combustibles such as cleaning rags or flammable substances shall be stored in closed metal containers in approved areas that provide adequate ventilation. Combustibles shall be stored away from the food preparation areas and away from the resident rooms. C. Poisonous or flammable substances shall not be stored in residential areas, food preparation areas or food storage areas. If hazardous chemicals are stored on the property, material	A 038	<u>Chemicals stored in secure areas.</u> The supply closet near the dining room in the SW hallway was closed and locked as of 6/2/23. The locking hardware for this door was changed to a "self locking" system so that the door would automatically lock when closed instead of requiring a key as of 6/5/23. Housekeeping and maintenance staff were instructed to insure that this storage area, along with others that hold chemical supplies, are always to remain closed and locked whenever the staff is not present. The Administrator will check periodically, at least monthly, to assure that the storage doors remain closed and locked when not in use.	06/05/2023

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A 038	<p>Continued From page 7</p> <p>safety data sheets shall be maintained and stored in the same area as the chemicals, pursuant to state environment department requirements, 11.5.2.9 NMAC. [7.8.2.38 NMAC - Rp, 7.8.2.39 NMAC, 01/15/2010]</p> <p>This REQUIREMENT is not met as evidenced by: 7.8.2.38 C</p> <p>Based on observation and interview, the facility failed to ensure that cleaning supplies and hazardous chemicals were stored in secure areas and were not accessible to the residents.</p> <p>This deficient practice could likely result in the 41 (R #s 1-41) residents listed on the resident census list provided by the Administrator on 05/31/23, to be at risk of harm, illness, or injury if the residents were to spill chemicals on themselves, or ingest hazardous chemicals.</p> <p>A. On 05/31/23 at 8:24 am, during an observation of an opened and unlocked supply room on the Southwest hall near the dining room, the following cleaning supplies and chemicals were observed:</p> <ol style="list-style-type: none"> 1. Eight (8) gallon bottles of bleach 2. Three (3) one quart bottles liquid cream cleanser 3. Nine (9) 21 oz (ounce) cans of all purpose cleaner 4. Eighteen (18) one gallon bottles of liquid odor eliminator 5. Eleven (11) one gallon bottles of alcohol hand sanitizer 6. Two (2) one gallon bottles of glass cleaner 7. One (1) one gallon of carpet cleaning machine concentrate 	A 038		

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A 038	Continued From page 8 8. Two (2) one gallon bottles of acid detergent 9. One (1) one gallon bottle of low foam extractor cleaner (a quarter full) 10. Fourteen (14) 32 oz bottles of odor eliminator 11. One (1) 32 oz bottle of disinfectant cleaner 12. One (1) 32 oz bottle of grill cleaner (one third full) 13. One (1) 32 oz bottle of odor eliminator/extractor (half full) 14. Three (3) 19 oz cans of disinfectant spray B. On 06/01/23 at 2:07 pm, during an interview with Administrator, she confirmed the above findings of the unsecured chemicals in the opened and unlocked supply room near the dining room in the Southwest hallway.	A 038		
A 045	7 NMAC 8.2.45 Water WATER: Pursuant to the current New Mexico drinking water requirements, 7.6.2.9 NMAC. A. The water supply system shall be constructed, protected, operated and maintained in conformance with applicable local, state and federal laws, ordinances and regulations. B. Where a facility is supplied by its own water system, the system shall meet the sampling and construction requirement of a non-community water system as defined by the current New Mexico drinking water requirements. C. All water that is not piped into the facility directly from a public water supply system shall be from an approved source, disinfected, transported, handled, stored and dispensed in a sanitary manner. Such water shall be prevented from entering potable water systems by appropriate cross connection and backflow prevention devices. D. Hot and cold running water, under pressure	A 045		

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A 045	<p>Continued From page 9</p> <p>shall be provided in all areas where food is prepared and where equipment and utensils are washed, sinks, lavatories, washrooms and laundries.</p> <p>E. The hot water temperature that is accessible to residents shall be maintained at a minimum of ninety-five (95) degrees fahrenheit and a maximum of one hundred ten (110) degrees fahrenheit. Hot water in excess of one hundred ten (110) degrees fahrenheit is permitted in kitchen and laundry areas, provided that residents are supervised in order to prevent injury. [7.8.2.45 NMAC - Rp, 7.8.2.46 NMAC, 01/15/2010]</p> <p>This REQUIREMENT is not met as evidenced by: 7.8.2.45 (E)</p> <p>Based on observation and interview, the facility failed to ensure hot water temperatures in resident restrooms were maintained at a maximum of 110 degrees Fahrenheit (F).</p> <p>This deficient practice could likely result in the 41 (R #s 1-41) residents listed on the census list provided by the Administrator on 05/31/23, to be at risk of being injured and burned by water that is too hot.</p> <p>The findings are:</p> <p>A. On 05/31/23 at 2:42 pm, during observation of an empty resident room #40, the restroom sink hot water temperature was observed to be 139 degrees F.</p> <p>B. On 06/01/23 at 10:02 am, during observation</p>	A 045	<p><u>Water Temperatures at 110 degrees or less.</u></p> <p>Water supply mixing valves affecting Rooms 34 and 40, and all other rooms on the SW corridor were adjusted starting 6/2/23 to assure that water temperatures in resident restroom and kitchenette areas remained at 110 degrees or less. Daily water temperature checks will be made by the Administrator or delegated staff from 6/5/23 thru 6/30/23, and weekly from 6/30/23 thru 8/30/23 and monthly thereafter. The water temperature checks will rotate thru the four different corridors. Any temperature reading in excess of 110 will be reported to the Administrator immediately, and a mixing valve adjustment will be made to return temperatures to the required levels. A plumbing contractor was hired to review the system of mixing valves for the entire building to assure reasonably consistent temperatures in all resident rooms which remain at or below 110 degrees. This work was completed by 6/30/23, and will be repeated if temperature checks exceed 110 degrees.</p>	06/30/2023

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A 045	Continued From page 10 of room #34, the restroom sink hot water temperature was observed to be 125 degrees F. C. On 06/01/23 at 10:02 am, during observation and interview with the Administrator, she confirmed the hot water temperature in room #34 restroom sink was 125 degrees F. D. On 06/01/23 at 10:03 am, during an interview with the Administrator, she indicated that the empty resident room #40, is connected to the same water heater as room #34 and confirmed the hot water temperature was 139 degrees F in the empty resident room.	A 045		
A 054	7 NMAC 8.2.54 Resident Rooms RESIDENT ROOMS: A. The facility ' s bed capacity shall not exceed the capacity approved by the licensing authority. B. Each resident room shall have an outside room with a window. The area of the outdoor window shall be at least one tenth (1/10th) of the floor area of the room. C. Resident rooms shall not be less than seven (7) feet wide in any horizontal dimension. D. There must be no through traffic in resident rooms. Resident rooms must connect directly to other internal common areas of the facility. E. The window shades, drapes, curtains, or blinds in the resident rooms shall be in good repair and of flame-retardant materials. F. Resident rooms may be private or semi-private. Semi-private rooms may not house more than two (2) residents. (1) Private rooms shall have a minimum of one hundred (100) square feet of floor area. The closet and locker area shall not be counted as part of the available floor space.	A 054	<u>Window coverings in good repair.</u> Window blinds in Room 10 were repaired as of 6/15/23 to meet the requirement for adjustable window coverings in good repair. All other window coverings were inspected by the Administrator by 6/15/23 to assure that these were in good repair. Housekeeping staff have been instructed to notify the Administrator using a written work order of any window coverings that are in need of repair or replacement at the time of the weekly deep cleaning schedule. In addition, a weekly walk-through will be conducted by the Administrator or Maintenance Manager to inspect for any issues.	06/15/2023

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A 054	<p>Continued From page 11</p> <p>(2) Semi-private rooms shall have a minimum of eighty (80) square feet of floor area for each bed and shall be furnished in such a manner that the room is not crowded and passage out of the room is not obstructed. A separate closet for each resident shall be provided. The closet and locker area shall not be counted as part of the available floor space. The beds shall be spaced at least three (3) feet apart.</p> <p>G. If a resident chooses not to bring their own furnishings to the facility; each resident room shall be provided with, as a minimum, the following furnishings per resident:</p> <p>(1) a bed that shall be at least thirty-six (36) inches wide, of sturdy construction and in good repair;</p> <p>(2) each bed shall be provided with a clean, comfortable mattress of at least four (4) inches in thickness, which is waterproof, or protected with a waterproof covering and a mattress pad;</p> <p>(3) each bed shall be provided with a clean, comfortable pillow;</p> <p>(4) each bed shall be provided with a pillow case, two (2) clean sheets, blankets and a bedspread appropriate for the weather and the climate;</p> <p>(5) an individual closet or closet area with a clothes rack for hanging clothes and shelves or drawers that are accessible to the resident;</p> <p>(6) a dresser with drawers;</p> <p>(7) a bedside table or desk;</p> <p>(8) a chair;</p> <p>(9) a reading lamp; and</p> <p>(10) a mirror.</p> <p>[7.8.2.54 NMAC - Rp, 7.8.2.55 NMAC, 01/15/2010]</p> <p>This REQUIREMENT is not met as evidenced by: 7.8.2.54 E</p>	A 054		

Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 5831	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/05/2023
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NAME OF PROVIDER OR SUPPLIER WESTWIND HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 6600 LOS VOLCANES NW ALBUQUERQUE, NM 87121
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A 054	Continued From page 12 Based on observation and interview, the facility failed to ensure that the window coverings and blinds were in good repair. This deficient practice could likely result in the 41 (R #s 1-41) residents listed on the census list provided by the Administrator on 05/31/23, to be at risk of not having sufficient privacy, or the ability to have light and shade in their room, or to help heat or cool their rooms. The finding are: A. On 05/31/23 at 9:45 am, during an observation of R #10's room, the window blinds were observed to have broken and bent pieces. B. On 06/01/23 at 9:50 am, during an interview and walk-around with the Administrator, she confirmed that the blinds in R #10's room were broken.	A 054		
A 059	7 NMAC 8.2.59 Windows WINDOWS: A. Each sleeping room shall be provided with an exterior window. (1) The window shall be operable, screened and have a clear operable area of 5.7 square feet minimum; measured twenty (20) inches wide minimum and measured twenty-four (24) inches high minimum. (2) The top of the window sill shall not be more than forty-four (44) inches above the finished floor. B. Screens shall be provided on all operable windows. C. The proposed use of bars, grilles, grates or similar devices shall be reviewed and approved	A 059	<u>Window screens in good repair.</u> Damaged or missing window screens of Rooms 13, 33,37 and three additional SW courtyard window screens were repaired or replaced, with work completed by 6/17/23 to assure that all resident rooms had window screens in place and in good repair. The Administrator conducted an exterior review of the full building to assure that all window screens were in place and in good repair. This was also completed by 6/17/23. Window-screens will be included in a weekly inspection to be conducted by maintenance staff or the Administrator	06/17/2023

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A 059	<p>Continued From page 13</p> <p>by the licensing authority prior to installation. D. Sleeping rooms, living rooms, activity room areas and dining room areas shall have a window area of at least one tenth (1/10) of the floor area with a minimum of ten (10) square feet. [7.8.2.59 NMAC - Rp, 7.8.2.52 NMAC, 01/15/2010]</p> <p>This REQUIREMENT is not met as evidenced by: 7.8.2.59 B</p> <p>Based on observation and interview, the facility failed to ensure that all operable windows had screens.</p> <p>This deficient practice could likely result in the 41 (R #s 1-41) residents identified on the resident census provided by Administrator on 05/31/23, to be at risk of injury or illness due to bug bites or allergens because the screens on windows had holes in them. The findings are:</p> <p>A. On 05/31/23 at 9:45 am, during an observation of the facility, the following windows were found with either missing or damaged screens:</p> <ol style="list-style-type: none"> 1. Room #13 had a bent screen on the window 2. Room #37 was missing a window screen 3. Room #32 the screen was off the frame 4. The middle patio had three windows on the Southwest side of the building that were missing screens <p>B. On 06/01/23 at 9:50 am, during an interview and walk-around with the Administrator, she confirmed the above windows had either missing screens or damaged/bent screen frames.</p>	A 059		

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A 065	Continued From page 14	A 065		
A 065	<p>7 NMAC 8.2.65 Fire Drills</p> <p>FIRE DRILLS: All facilities shall conduct monthly fire drills which are to be documented.</p> <p>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.</p> <p>B. A record of the monthly fire drills shall be maintained on file in the facility and readily available. Fire drill records shall show:</p> <ol style="list-style-type: none"> (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. <p>C. If applicable, the local fire department may be requested to supervise and participate in fire drills.</p> <p>[7.8.2.65 NMAC - Rp, 7.8.2.65 NMAC, 01/15/2010]</p> <p>This REQUIREMENT is not met as evidenced by: 7.8.2.65 B (5)</p> <p>Based on record review and interview, the facility failed to ensure that the monthly fire drills included the evacuation time in total minutes.</p> <p>This deficient practice could likely result in the 41 (R #s 1-41) residents identified on the census, provided by the Administrator on 05/31/23, to be at risk of harm, injury, or death if a fire were to occur and the Direct Care Staff (DCS) do not</p>	A 065	<p><u>Fire Drills to include recorded evacuation times.</u></p> <p>The Maintenance Director was instructed on 6/2/23 to always include a recording of evacuation times along with each required and recorded fire drill.</p> <p>The Administrator will review the fire drill records for all fire drills to assure that evacuation times are measured and recorded as part of the documentation for every required fire drill.</p>	06/02/2023

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A 065	<p>Continued From page 15</p> <p>know how to safely and quickly evacuate the residents from the building.</p> <p>The findings are:</p> <p>A. Record review of the facility's fire drill records for the months of January 2023 and April 2023 revealed:</p> <ol style="list-style-type: none"> 1. Monthly Fire Drill Log for 01/12/23 did not include the evacuation time in total minutes 2. Monthly Fire Drill Log for 04/21/23 did not include the evacuation time in total minutes <p>B. On 06/01/23 at 3:16 pm, during an interview with the Administrator, she confirmed the facility fire drill logs for the months of January 2023 and April 2023 did not include the evacuation time in total minutes.</p>	A 065		