

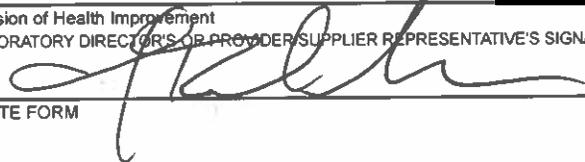
Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  2162	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  C 11/13/2023
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NAME OF PROVIDER OR SUPPLIER  BROOKDALE TRAMWAY RIDGE #2	STREET ADDRESS, CITY, STATE, ZIP CODE 4910 TRAMWAY RIDGE DRIVE NE ALBUQUERQUE, NM 87111
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(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	<p>Initial Comments</p> <p>The following deficiency was cited during a Complaint survey completed on [REDACTED] 23 for the state requirements of NMAC 7.8.2, Regulations for Assisted Living Facilities for Adults.</p> <p>Complaint Intake ID [REDACTED] was investigated with no deficiencies cited.</p> <p>Complaint Intake ID [REDACTED] was investigated with no deficiencies cited.</p> <p>Census: 44</p>	A 000	<p>The Following plan of correction for Brookdale Tramway Ridge regarding the statement Of deficiencies dated [REDACTED] 2023. This plan of correction is not to be construed as an admission of or agreement with the findings and conclusions in the statement of deficiencies or any related sanctions or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with satisfactory and regular regulations in this document, we have outlined specific actions in response to identified issues. We have not provided a details response to each allegation or finding nor have we identified mitigating factors. We remain committed to the delivery of quality healthcare services and will continue to make changes and improvements to satisfy that objective.</p>	
A 052	<p>7 NMAC 8.2.52 Corridors</p> <p><b>CORRIDORS:</b></p> <p>A. Corridors in an existing building shall have a minimum width of thirty-six (36) inches. Corridors in newly constructed facilities shall have a minimum width of forty-four (44) inches.</p> <p>B. Corridors shall have a clear ceiling height of not less than seven (7) feet measured to the lowest projection from the ceiling.</p> <p>C. Corridors shall be maintained clear and free of obstructions at all times.</p> <p>D. The floors of corridors and hallways shall be waterproof, greaseproof, smooth, slip-resistant and durable.</p> <p>[7.8.2.52 NMAC - Rp, 7.8.2.53 NMAC, 01/15/2010]</p> <p>This REQUIREMENT is not met as evidenced by: 7.8.2.52 C</p> <p>Based on observation and interview, the facility failed to ensure the stairwells/corridors were kept clear and free of obstructions at all times. This deficient practice could likely result in the [REDACTED]</p>	A 052	<ol style="list-style-type: none"> <li>1) The community will clear corridors to reflect width of 36 inches in existing facilities and 44 inches and newly constructed facilities.</li> <li>2) Corridores will have clear ceiling heights of no less than 7 feet.</li> <li>3) Cooridors will maintain clear and free of obstructions at all times.</li> <li>4) The Cooridor floors and hallways will be waterproof, greaseproof, smooth, and slip resistant.</li> <li>5) Executive Director/designee is responsible for this plan.</li> <li>6) Completion date [REDACTED] 2023</li> </ol>	

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



TITLE

Executive Director

(X6) DATE

12-20-23

Division of Health Improvement

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A 052	<p>Continued From page 1</p> <p>██████ residents identified on the census provided by the Health and Wellness Director on ██████ 23, to be at risk of tripping, falling, or having objects fall on them, if the corridors are blocked and do not allow residents to safely exit the building in case of fire or other emergency requiring evacuation. The findings are:</p> <p>A. On ██████ 23 at 9:17 am, during observation of the stairwell labeled E-1, there were dining room chairs and furniture in the corner of the stairwell.</p> <p>B. On ██████ 23 at 9:19 am, during an observation of the stairwell labeled E-LL, the following items were observed:</p> <ol style="list-style-type: none"> <li>1. A power drain snake.</li> <li>2. A wheelchair.</li> <li>3. Drywall sheets.</li> <li>4. Laminate flooring.</li> <li>5. A juice machine.</li> <li>6. Flooring adhesive materials.</li> </ol> <p>C. On ██████ 23 at 9:20 am, during observation of the stairwell labeled N-1, there was an antique stand that appeared to be used to hold a painting or picture in the corner of the stairwell.</p> <p>D. On ██████ 23 at 9:30 am, during an interview, the Maintenance Technician confirmed the objects were in the stairwell/corridors and stated they needed to be moved.</p>	A 052	<ol style="list-style-type: none"> <li>1) The community will clear all stairwells of obstruction items And remain clear for emergency exiting</li> <li>2) Executive director/designee responsible for this plan</li> <li>3) Completion date ██████ 2023</li> </ol>	