

Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 5720	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 04/03/2024
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NAME OF PROVIDER OR SUPPLIER FAIRWINDS RIO RANCHO	STREET ADDRESS, CITY, STATE, ZIP CODE 920 RIVERVIEW DRIVE SE RIO RANCHO, NM 87124
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A 000 Initial Comments

The following deficiencies were cited during a Complaint survey completed on 04/03/24 for the state requirements of NMAC 7.8.2, Regulations for Assisted Livings for Adults.

Complaint Intake # [REDACTED] was investigated with no deficiencies cited.

Complaint Intake # [REDACTED] was investigated with deficiencies cited.

Resident Census: 78

A 033 7 NMAC 8.2.33 Resident Rights

RESIDENT RIGHTS: All licensed facilities shall understand, protect and respect the rights of all residents.

A. Prior to admission to a facility, a resident and legal representative shall be given a written description of the legal rights of the resident, translated into another language, if necessary, to meet the resident's understanding.

B. If the resident has no legal representative and is incapable of understanding his or her legal rights, a written copy of the resident's legal rights shall be provided to the most significant responsible party in the following order:

- (1) the resident's spouse;
- (2) significant other;
- (3) any of the resident's adult children;
- (4) the resident's parents;
- (5) any relative the resident has lived with for six or more months before admission;
- (6) a person who has been caring for, or paying benefits on behalf of the resident;
- (7) a placing agency;
- (8) resident advocate; or
- (9) the ombudsman.

C. The resident rights shall be posted in a

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

TITLE *Administrator,*
BMM (X5) DATE *7/17/24*

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A 033	Continued From page 1 conspicuous public place in the facility and shall include the telephone numbers for the incident management hotline and for the state ombudsman program. D. To protect resident rights, the facility shall: (1) treat all residents with courtesy, respect, dignity and compassion; (2) not discriminate in admission or services based on gender, sexual orientation, resident's age, race, religion, physical or mental disability, or nationality; (3) provide residents written information about all services provided by the facility and their costs and give advance written notice of any changes; (4) provide residents with a safe and sanitary living environment; (5) provide humane care for all residents; (6) provide the right to privacy, including privacy during medical examinations, consultations and treatment; (7) protect the confidentiality of the resident ' s medical record; (8) protect the right to personal privacy, including privacy in personal hygiene; privacy during visits with a spouse, family member or other visitor; and privacy in the resident's own room; (9) protect the right to communicate privately and freely with any person, including private telephone conversations and private correspondence; and the right to receive visits from family, friends, lawyers, ombudsmen and community organizations; (10) prohibit the use of any and all physical and chemical restraints; (11) ensure that residents: (a) are free from physical and emotional abuse neglect and misappropriation/or exploitation; (b) are free from financial abuse and misappropriation by facility staff or management;	A 033		
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[Signature], Administrator

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A 033	<p>Continued From page 2</p> <p>(c) are free to participate in religious, social, community and other activities and freely associate with persons in and out of the facility;</p> <p>(d) are free to leave the facility and return without unreasonable restriction;</p> <p>(e) are given a fifteen (15) calendar day, written notice before room transfers or discharge from the facility unless there is immediate danger to self or others in the facility;</p> <p>(f) have an environment that fosters social interaction and avoids social isolation;</p> <p>(g) or their surrogate decision makers, are informed of and consent to the services provided by the facility;</p> <p>(h) have the right to voice grievances to the facility staff, public officials, the ombudsmen, any state agency, or any other person, without fear of reprisal or retaliation;</p> <p>(i) have the right to have their complaints addressed within fourteen (14) calendar days or sooner;</p> <p>(j) have the right to participate in the development of their care plan/ISP;</p> <p>(k) have the right to choose a doctor, pharmacist and other health care provider(s);</p> <p>(l) have the right to participate in medical treatment decisions and formulate advance directives such as living wills and powers of attorney;</p> <p>(m) have the right to keep and use personal possessions without loss or damage;</p> <p>(n) have the right to manage and control their personal finances;</p> <p>(o) have the right to freely organize and participate in a resident association that may recommend changes in the facility's policies, services and management;</p> <p>(p) shall not be required to work for the facility; and</p>	A 033		
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A 033	<p>Continued From page 3</p> <p>(q) are protected from unjustified room transfers or discharge.</p> <p>E. The resident's rights shall not be restricted unless this restriction is for the health and safety of the resident, agreed to by the resident or the resident's surrogate decision maker and outlined in the resident's individual service plan. [7.8.2.33 NMAC - Rp, 7.8.2.34 NMAC, 01/15/2010]</p> <p>This REQUIREMENT is not met as evidenced by: 7.8.2.33 D (11) b</p> <p>Based on record review and interview, the facility failed to ensure for 1 (R #2) of 1 (R #2) residents identified by the facility as being at risk of exploitation and were free from financial abuse and misappropriation by facility staff. This deficient practice resulted in the resident experiencing both financial and psychosocial harm resulting from a substantial loss of income. The findings are:</p> <p>A. Record review of Complaint Intake # [REDACTED] assigned on 02/08/24, revealed Direct Care Staff (DCS) #1 asked R #2 for a loan.</p> <p>B. Record review of DCS #1's employee file revealed that the Administrator sent a Notice of Termination e-mail to the Business Operations Manager on 01/30/2024. This was the facility's "official" notice of termination. DCS #1's actual last day working at the facility was 01/26/24. She was escorted off the premises and asked not to return or the facility would call the police.</p> <p>C. Record review of the facility's Internal Incident</p>	A 033	<p>Plan of correction completed 7/18/24</p> <p>2/29/24 Wellness ANE training 3/28/24 New Employee Orientation 4/25/24 All staff training 7/18/24 New Employee Orientation</p> <p>As per our routine move-in process, AEB document R#2 Lease [REDACTED] which was reviewed, signed and copied for R#2 prior to move-in, Resident Rights were reviewed, discussed and copy given to R#2. The facility makes every possible effort to protect all residents from ANE by developing close relationships with residents and being available 24/7 for any and all concerns, however, they maintain the right to make their own financial decisions without discussing with leadership staff.</p> <p>For findings-A033 cited as being deficient in protecting residents from financial abuse and misappropriation by staff. The Community has in the past and will continue in the future to educate and train all staff regarding ANE. We have documented evidence that training and education was done to the best of our ability for both R#2 & DCS#1 prior to the incident.</p> <p>We will continue to follow our standards for training and educating per DOH regs and Leisure Care Policies. We will monitor ongoing compliance as we have always done, by documented education on Resident Rights, ANE and Leisure Care Standards of Care.</p> <p>A: Complaint Intake [REDACTED] on 2/28/24, was a Self-Report from Fairwinds Rio Rancho 2/8/24 upon learning of the situation.</p> <p>B: A notice of termination was emailed to DCS#1 on 1/30/24 as a written follow-up to the in-person termination by GM and being escorted off of the property on 1/26/24.</p>

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A 033	<p>Continued From page 4</p> <p>Report dated 02/08/24 revealed on 01/23/24 at 7:30 pm, DCS #1 approached R #2 and asked for a \$2000 loan. R #2 stated [redacted] gave it to her because [redacted] alt sorry for DCS #1.</p> <p>D. Record review of R #2's check revealed that it was made to DCS #1 for the following: On 01/23/24, check #8059 was made for \$2,000. The check was endorsed by [Name of DCS #1] and contained DCS #1's signature.</p> <p>E. Record review of R #2's [Name of Bank] statement from 01/19/24 to 02/18/24 revealed, that check #8059 was deducted from R #2's bank account on 01/23/24 for \$2000. The check does not specify where it was cashed.</p> <p>F. Record review of local law enforcement report dated 02/09/24, revealed the [Name of Police Officer] documented the following:</p> <ol style="list-style-type: none"> [Name of Police Officer] contacted DCS #1 via telephone. DCS #1 stated she was going through a hard time and asked R #2 for money. DCS #1 stated that she did not know that it was against the policy to ask for money, or else she wouldn't have done it. DCS #1 then stated that she was going to pay back R #2. DCS #1 stated she needed to, and R #2 stated [redacted] would sue her civilly for the money. DCS #1 stated she understood and will contact R #2. <p>G. On 04/02/24, at 9:45 am, during an interview with R #2, [redacted] stated that DCS #1 approached her at the time in question (R #2 could not remember the exact date and time of the incident) and asked [redacted] for a loan. [redacted] admits to writing a check to DCS #1 for \$2000. R #1 stated that at the time [redacted] was in a lot of physical pain and [redacted] was not in the right mental state to</p>	A 033	<p>C: Not in dispute</p> <p>D: Not in dispute. Incident was self-reported by Community, who obtained the copy of the check provided to DOH and RRPD.</p> <p>E: Not in dispute; self-report</p> <p>F: Not in dispute. Community self-reported and filed initial Police report.</p> <p>2: DCS#1 did know it is against policy AEB New Employee Orientation on 9/19/23 in which ANE are covered extensively by GM. DCS#1 signed acknowledgement of attendance and understanding. Employee Handbook; Standards of Care-Page 39; Specifically Dishonesty; Borrowing money or other valuables from a resident. Resident Rights and the Community's responsibility to protect against ANE (Employees Statement of understanding 09/19/23?.</p> <p>2. As of the date of this POC DCS#1 has neither paid back the "loan", nor attempted to contact R#2 by any method.</p> <p>G: Not in dispute. During internal investigation process the Community obtained and provided a copy of Res#2's cancelled check in our initial self-report, as well as to RRPD.</p>	
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A 033	<p>Continued From page 5</p> <p>make such a decision. [redacted] further stated that DCS #1 came back later and asked [redacted] for \$5000. [redacted] did not give her anymore money. [redacted] believes that DCS #1 cashed the check-in person at the bank. The police came and took back a copy of the check and stated that they would go visit the DCS #1. The situation has been weighing [redacted] mentally.</p> <p>H. On 04/02/24, at 10:30 am, during an interview with R #1, [redacted] state [redacted] bank account was substantially affected due to the check cashed by DCS #1.</p> <p>I. On 04/02/24, at 12:35 pm, during an interview the Health and Wellness Director, she stated R #2's bank account was substantially affected due to the check cashed by DCS #1.</p> <p>J. On 04/02/24, at 2:25 pm, during an interview with the Administrator, she stated R #2's bank account was substantially affected due to the check cashed by DCS #1.</p>	A 033	<p>H: Not disputed</p> <p>I: Not disputed</p> <p>J: Not disputed</p> <p>The events which occurred during this incident are not disputed as it did happen and was reported by Senior Leadership upon learning of and after internal investigation of the financial exploitation. It is unfortunate that a self-reported "complaint" is substantiated in a situation in which that is ultimately out of a facility's control. As per every right a resident has and when not deemed incompetent, they are free to decide how or when they use their own finances.</p>	
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[Signature] Administrator