

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 325032	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/31/2025
NAME OF PROVIDER OR SUPPLIER Sandia Ridge Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2216 Lester Drive NE Albuquerque, NM 87112	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39509</p> <p>Based on record review and interview, the facility failed to ensure that resident injuries of unknown sources were reported to the State Agency within 24 hours to the state agency for 1 (R #4) of 2 (R #4 and R #5) residents reviewed. If the facility is not immediately investigating and reporting injuries of unknown sources residents are likely to be at risk of further injuries. The findings are:</p> <p>R #4</p> <p>A. Record review of R #4's face sheet revealed R #4 was admitted to the facility on [DATE] with multiple diagnoses including:</p> <ul style="list-style-type: none"> -Pain in Left Hip. -Dementia (a progressive disease that affects memory). -Lack of Coordination. <p>Face sheet further revealed she was readmitted to the facility on [DATE] with new diagnoses including:</p> <ul style="list-style-type: none"> -Fracture of Left Femur (large upper leg bone) with routine healing. -Fracture of left Patella (knee bone) <p>B. Record review of R #4's X-ray report of the left leg dated 10/29/24 stated no acute fracture or dislocation. Prior fixation hardware (surgically placed metal supports and screws used to repair fractured bones) present.</p> <p>C. Record review of R #4's hospital H & P (history and physical) report revealed R #4 was admitted to hospital for leg pain on 11/03/24. R #4 reported she fell a few days ago landing on her left hip and today (11/03/24) she began having pain. Record continues to state History of Present Illness R #4 was brought to hospital for evaluation of left hip pain after mechanical fall. It further stated R #4 sustained a mechanical fall on the afternoon before (11/02/24) landed on her left hip. There was no head trauma or loss of consciousness.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>D. Record review of R #4's daily progress notes dated 11/03/24 at 10:31 am reported R #4 pain issue: Location Left Hip. Note dated 11/03/24 at 12:39 pm reported R #4 was transferred to [name of hospital] and listed reason for transfer edema (swelling) new or worsening.</p> <p>E. Record review of R #4's facility pre-admission note dated 11/06/24 stated patient's hospital diagnoses for hospital admission was for evaluation of left hip pain after mechanical fall. Note further stated R #4 had incisions (surgical cuts) from surgery.</p> <p>F. Record review of R #4's daily progress note dated 11/06/24 at 6:36 pm reported that R #4 had been returned to the facility with new skin issue described dot-like wound present on admission. Front left trochanter (upper end of leg bone-hip bone)-surgical site closed with staples. Left patella (Knee Bone) -surgical site closed with staples.</p> <p>G. On 01/29/25 at 2:59 pm during interview with Administrator (ADM), she stated that she was not aware that R #4 had fallen on 11/03/24 and was not aware of the extent of her injuries. She stated that had she known, she would have conducted an investigation and reported to the state agency as required. ADM acknowledged that neither she nor any other staff investigated these reported changes on 11/03/24 or upon R #4's return from the hospital on 11/06/24. ADM stated there had been no initial report of the incident to the state agency and no five day follow up report submitted to the state agency.</p> <p>47031</p>		

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Respond appropriately to all alleged violations.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39509</p> <p>Based on record review and interview, the facility failed to investigate and report within five working days, injuries of unknown origin for 1 (R #4) of 2 (R #4 and R #5) residents reviewed for incidents. If the facility is not completing an accurate and thorough investigation and submitting the summary of the facility's investigation to the State Agency, then the State Agency is unable to appropriately triage (review) the allegation for further investigation. The findings are:</p> <p>R #4</p> <p>A. Record review of R #4's face sheet revealed R #4 was admitted to the facility on [DATE] with multiple diagnoses including:</p> <ul style="list-style-type: none"> -Pain in Left Hip. -Dementia (a progressive disease that affects memory). -Lack of Coordination. <p>Face sheet further revealed she was readmitted to the facility on [DATE] with new diagnoses including:</p> <ul style="list-style-type: none"> -Fracture of Left Femur (large upper leg bone) with routine healing. -Fracture of left Patella (knee bone) <p>B. Record review of R #4's X-ray report of left leg dated 10/29/24 stated no acute fracture or dislocation. Prior fixation hardware (surgically placed metal supports and screws used to repair fractured bones) present</p> <p>C. Record review of R #4's daily progress note dated 11/03/24 at 12:39 pm reported that R #4 was transferred to (name of hospital) and listed reason for transfer edema (swelling) new or worsening.</p> <p>D. Record review of R #4's facility pre-admission note dated 11/06/24 stated patient's hospital diagnoses for hospital admission was for evaluation of left hip pain after mechanical fall. Note further stated R #4 has incisions (surgical cuts) from surgery.</p> <p>E. Record review of R #4's hospital H & P Notes (history and physical) revealed R #4 was admitted to hospital for leg pain. R #4 reported she fell a few days ago landing on her left hip and today (11/03/24) she began having pain. Record continues to state History of Present Illness that R #4 was brought to hospital for evaluation of left hip pain after mechanical fall. It further states R #4 sustained a mechanical fall on the afternoon before (11/02/24) landed on her left hip. There was no head trauma or loss of consciousness.</p> <p>(continued on next page)</p>		

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>F. Record review of R #4's daily progress note dated 11/06/24 at 6:36 pm reported that she had been returned to the facility with new skin issue described dot-like wound present on admission. Front left trochanter (upper end of leg bone-hip bone)-surgical site closed with staples. Left patella-surgical site closed with staples.</p> <p>G. On 01/29/25 at 10:15 am during interview with Assistant Director of Nursing (ADON) #2 he confirmed that R #4 was transferred to hospital on 11/03/24 and returned on 11/06/24. He stated the daily progress notes indicated that R #4 had returned from hospital with surgical sites and orders to provide wound care. He stated there was no indication of any fall within the facility prior to 11/03/24 and no fall was reported to staff.</p> <p>H. On 01/29/25 at 2:59 pm during interview with Administrator (ADM), she stated that she was not aware that R #4 had fallen on 11/03/24 and was not aware of the extent of her injuries. She stated that had she known, she would have conducted an investigation and reported to the state agency as required. ADM acknowledged that neither she nor any other staff investigated these reported changes on 11/03/24 or upon R #4's return from the hospital on 11/06/24. ADM stated there had been no initial report of the incident to the state agency and no five day follow up report submitted to the state agency.</p> <p>47031</p>		

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<p>F 0760</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure that residents are free from significant medication errors.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39509</p> <p>Based on record review and interview the facility failed to ensure that 1 (R #1) of 1 (R #1) resident received prescribed intravenous (IV) (medications administered directly into the vein) medications on time in accordance with professional standards of practice. The facility failed to provide and administer antibiotic (antibacterial) medications as ordered by the prescriber. The findings are:</p> <p>A. Record review of R #1's face sheet revealed R #1 was admitted to the facility on [DATE] with multiple diagnoses including:</p> <ul style="list-style-type: none"> -Acute (sudden onset) Infective Endocarditis (a serious, potentially life threatening bacterial infection of the heart) -Bacteremia (a serious bacterial infection of the blood stream) and was transferred to a local hospital on 11/14/24 and was discharged the same day. <p>B. Record review of R #1's provider orders revealed the following:</p> <ul style="list-style-type: none"> -10/19/24 Ampicillin (antibiotic medication used to treat bacterial infections) 2 GM (grams). Use 100 ml (milliliter) intravenously every four hours for Enterococcus faecalis (a specific bacteria) Bacteremia until 11/25/24. -10/19/24 Ceftriaxone Sodium (antibiotic medication used to treat bacterial infections) 2 GM use 100 ml intravenously every 12 hours for Enterococcus faecalis bacteremia. No end date. <p>C. Record review of R #1's Daily Notes revealed the following:</p> <ul style="list-style-type: none"> -10/20/24 at 8:18 am Ampicillin Intravenous solution. Awaiting med (medication) delivery. -10/20/24 at 8:18 am Ceftriaxone intravenous solution. Awaiting med delivery. -10/20/24 at 10:38 am Ampicillion Intravenous Solution. Awaiting med delivery. -10/20/24 at 3:15 pm Ampicillin intravenous solution. Awaiting med delivery. -10/20/24 at 5:27 pm Family concerned about IV antibiotic administration and having medication available. Reassured family that pharmacy had been called and IV antibiotics were to arrive STAT (immediately). -10/20/24 10:01 pm Ampicillin intravenous solution. Awaiting pharmacy delivery. -10/20/24 at 10:01 pm Ceftriaxone intravenous solution. Awaiting pharmacy delivery. -10/21/24 at 1:07 am Change in Condition-Transferred to hospital. -10/21/24 at 11:04 pm Ampicillin intravenous solution. Awaiting pharmacy delivery. <p>(continued on next page)</p>		

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<p>F 0760</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-10/22/24 at 4:18 am Ampicillin intravenous solution. Awaiting pharmacy delivery.</p> <p>D. Record review of R #1's hospital emergency room care note dated 10/21/24 revealed R #1 was received at the emergency room due to not receiving prescribed antibiotic medications and R #1's son's concern that she had not been administered any antibiotic medications for three days.</p> <p>E. Record review of R #1's Medication Administration Record (MAR) for the month of October 2024 revealed the following:</p> <p>-Ampicillin Intravenous Solution was administered on 10/19/24 at 11:00 pm and on 10/20/24 at 3:00 am.</p> <p>-Ampicillin Intravenous Solution was due but not administered on 10/20/24 at 7:00 am, 10/20/24 at 11:00 am, 10/20/24 at 3:00 pm, 11/20/24 at 7:00 pm, 10/20/24 at 11:00 pm, and on 10/20/24 at 3:00 pm.</p> <p>-Ampicillin Intravenous Solution was due but not administered on 10/21/24 at 7:00 am and on 10/21/24 at 11:00 am due to R #1 being at hospital.</p> <p>-Ampicillin Intravenous Solution was administered on 10/21/24 at 3:00 pm and at 7:00 pm.</p> <p>-Ampicillin Intravenous Solution was due but not administered on 10/21/24 at 11:00 pm and on 10/21/24 at 3:00 pm.</p> <p>-Ceftriaxone intravenous solution was due but not administered on 10/20/24 at 8:00 am and 10/20/24 at 8:00 pm.</p> <p>F. On 01/29/25 at 10:50 am during interview with the Assistant Director of Nursing (ADON) 2, he confirmed R #1 was admitted to the facility with orders to administer antibiotics intravenously. He confirmed that R #1's IV antibiotics were ordered but not available for multiple doses because to the pharmacy did not deliver the medications. ADON #2 stated that the ordered IV antibiotics must be administered on time to maintain a therapeutic level (an expected blood level of the medication so that the medication is effective) of the antibiotic medication. ADON 2 stated that this administration schedule would be especially critical for R #1 due to her diagnosis of Endocarditis.</p>		