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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 325034 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 04/21/2025 |
| NAME OF PROVIDER OR SUPPLIER The Rehabilitation Center of Albuquerque | | STREET ADDRESS, CITY, STATE, ZIP CODE 5900 Forest Hills Drive NE Albuquerque, NM 87109 | |

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

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| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) |
| <p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 51919</p> <p>Based on interviews, record reviews and observations, the facility failed to provide a safe, functional, sanitary, and comfortable environment for 1(R #1) of 1(R #1) residents observed, when staff failed to report or repair a broken wall inside R #1's room. This deficient practice is likely to lead to the following:</p> <ol style="list-style-type: none"> 1. Creating an environment conducive to mold and mildew growth. 2. Mice can enter through the broken wall and cause significant damage, spread diseases, and create unpleasant odors. They can chew through insulation, wiring, and other building materials, potentially leading to fires or structural problems. <p>The findings are:</p> <p>A. Record review of R #1's Face Sheet, undated, revealed R #1 was admitted to the facility on [DATE].</p> <p>B. Record review of the facility's Work Orders Report dated 11/01/24 through 04/22/25 showed staff did not report the broken wall in R #1's room.</p> <p>C. On 04/21/25 at 9:00 am, during observation of R #1's room, part of the wall was broken and had a hole.</p> <p>D. On 04/21/25 at 9:05 am, during an interview, R #1 stated the hole in the wall has been there since she moved to her room. She stated she did not report it to anybody. She stated she did not like to see the broken wall or the hole and expected the facility to fix it.</p> <p>E. On 04/21/25 at 1:45 pm, during an interview, Certified Nurse Aid (CNA) #1 stated she was not aware of the broken wall. She stated she would report the wall through the facility's Equipment Lifecycle System (TELS, is a building management platform that helps senior living facilities with maintenance, life safety, and asset management) if she knew about the hole.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>F. On 04/21/25 at 1:18 pm, during an interview, the Maintenance Director stated he was not aware of the broken wall in R #1's room. He stated the damaged wall properly was caused by water damage. He stated he expected staff who noticed the damaged wall to report it through TELS so he can fix it. He stated mold and mildew can grow inside the broken wall due to water damage and mice could enter inside the hole and be a source of diseases.</p> <p>G. On 04/21/25 at 2:10 pm, during an interview, the Director of Nursing (DON) stated he expected nurses and CNAs to report the broken wall to maintenance. He stated all staff in the facility have access to TELS and they can report any maintenance issues they witnessed. He stated mold and mildew can grow inside the broken wall due to water damage.</p> <p>H. On 04/21/25 at 2:30 pm, during an interview, the Administrator stated she expected staff to report the broken wall to maintenance through TELS. She stated the facility started Quality of life rounds three weeks ago and had not got to R #1's room yet. She stated Maintenance staff do their own rounds in conjunction with the quality rounds, but that would not be enough. She stated she encouraged residents and staff to report any Maintenance issues they witnessed.</p> | | |