

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  325037	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/28/2026
NAME OF PROVIDER OR SUPPLIER  Ladera Center		STREET ADDRESS, CITY, STATE, ZIP CODE  5901 Ouray Road NW Albuquerque, NM 87120	
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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<p>F 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives an accurate assessment.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on record review, and interview, the facility failed to complete an accurate Minimum Data Set (MDS; a federally mandated assessment instrument completed by facility staff) assessment for 1 (R #132) of 1 (R #132) resident reviewed for assessments. This deficient practice could likely result in the residents' preferences and care needs not being met. The findings are: A. Record review of R #132's facesheet revealed she was admitted on [DATE] and discharged to community on 04/15/23 with the following diagnoses (including but not limited to): 1. Unspecified intracapsular fracture of right femur (a type of bone fracture that occurs within the joint capsule, often affecting the hip). 2. Type 2 diabetes mellitus (condition in which the body [NAME] use insulin correctly and sugar builds up in the blood) without complications. 3. Systemic lupus erythematosus (an autoimmune disease in which the body's immune system mistakenly attacks its own healthy cells and tissues, leading to inflammation and damage in various organs and systems), unspecified. 4. Age-related osteoporosis (causes bones to become weak and brittle). 5. Unspecified dementia (is the loss of cognitive functioning that interferes with daily life and activities), unspecified severity, without behavioral disturbance. 6. Muscle weakness (generalized). B. Record review of R #132's progress notes revealed the following: 1. 03/25/23 Nursing notes: skin check completed: right hip dressing. Clean, dry, and intact. 2. 03/27/23 Nursing notes: skin check completed: right hip. 3. 03/28/23 Nursing notes: skin check completed: right hip. 4. 03/31/23 Nursing notes: a skin check was performed: right lower extremity (hands and feet). 5. 04/01/23 Nursing notes: a new pressure wound unstageable due to slough and or eschar in-house acquired. Location: Coccyx was assessed today. 6. 04/15/23 Nursing notes: R #132 family present for wound care and teaching regarding unstageable pressure injury to coccyx (small bone at the bottom of the spine) area. C. Record review of R #132's weekly skin check revealed the following: 1. 03/31/23 : no pressure injury. 2. 04/10/23 : pressure injury to sacrum (bone in lower spine), unstageable due to presence of slough. 3. 04/13/23: unstageable pressure injury to coccyx area, in-house acquired. Record review of R #132's Minimum Data Set revealed (MDS; a federally mandated assessment instrument completed by facility staff) revealed the following: 1. MDS dated [DATE] section M0210: no unhealed pressure ulcers or injuries. E. On 01/27/26 at 11:30am during an interview with the MDS Coordinator, she confirmed R #132's MDS assessment dated [DATE] did not accurately document the unstageable pressure injury to the coccyx area.</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 325037
		If continuation sheet Page 1 of 6

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<p>F 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on record review, observation and interview, the facility failed to provide quality care that meets professional standards for 6 (R #5, #39, #56, #90, #93, and #104) of 6 (R #5, #39, #56, #90, #93, and #104) residents reviewed when the staff failed to:-Follow physician orders.-Obtain physician ordersThese deficient practices are likely to result in residents not maintaining their optimal health as planned by their medical provider. The findings are:</p> <p>R #39:</p> <p>A. Record review of R #39's facesheet revealed he was admitted on [DATE] with the following diagnoses (including but not limited to):</p> <p>? 1. Nondisplaced fracture (nondisplaced fractures are often closed and do not move out of alignment) of right ulna (longer of the two bones in the forearm) styloid process (a slender projection of bone at the lower end of the ulna), subsequent encounter for closed fracture with routine healing. 2. Muscle weakness (generalized) 3. Other abnormalities of gait (is the pattern or manner of walking) and mobility 4. Influenza A virus with other respiratory manifestations (a respiratory illness).</p> <p>B. On 01/21/26 at 09:52 am during an observation inside R #39's room, R #39 was sitting on his wheelchair with his daughter at his side. R #39 had a brace to his right wrist and is receiving oxygen therapy via nasal cannula at 2 liters per minute (LPM).</p> <p>C. On 01/21/26 at 09:53 am during an interview with R #39, he stated his right wrist brace came from the hospital after he fell from home. R #39 stated he fell and broke his right wrist but does not require surgery. R #39 also stated that he does know why he is receiving oxygen at this facility.</p> <p>D. Record review of R #39's physician's order revealed R #39's does not have an order for oxygen therapy and right wrist brace.</p> <p>E. On 01/21/26 at 10:03 am during an interview with the Director of Nursing (DON), she confirmed R #39 has a right wrist brace and is receiving oxygen therapy with no orders in the electronic medical records. The DON stated that this should have been addressed by the nurses and received an order from the providers, but it did not happen.</p> <p>R #56</p> <p>F. Record review of R #56's facesheet revealed she was admitted on [DATE] with the following diagnoses (including but not limited to): ? ? 1. Type 2 diabetes mellitus (the body [NAME] use insulin correctly and sugar builds up in the blood) with hyperglycemia (happens when there's too much sugar in the blood). ? ? 2. Body mass index (BMI) 60.0 to 69.9, adult. ? ? 3. Long term use of insulin (natural hormone that turns food into energy and manages blood sugar level). ? ? 4. Long term use of injectable non-insulin antidiabetic drugs.</p> <p>G. Record review of R #56's physician's order revealed the following: ? ? 1. 08/13/24: Mounjaro (prescription once weekly injectable medication for type 2 diabetes) pen-injector 2.5 MG (milligrams) / (per 0.5 (milliliters) ML, inject 0.5 ml subcutaneously (applied under the skin) every Wednesday. Discontinued 08/14/25. ? ? 2. 08/14/24: Mounjaro pen-injector 2.5 MG / 0.5 ML inject 0.5 ml</p> <p>(continued on next page)</p>		

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<p>F 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>subcutaneously one time a day every Wednesday. Discontinued 01/29/25. ? ? 3. 01/29/25: Mounjaro auto-injector 2.5 MG / 0.5 ML inject 0.5 ml subcutaneously at bedtime every Thursday. Discontinued 04/22/25. ? ? 4. 04/22/25: Mounjaro auto-injector 5 MG / 0.5 ML inject 0.5 ml subcutaneously at bedtime every Thursday. Discontinued 05/07/25. ? ? 5. 05/07/25: Mounjaro auto-injector 2.5 MG / 0.5 ML inject 2.5 mg subcutaneously one time a day every Thursday. Discontinued 07/09/25. ? ? 6. 07/09/25: Mounjaro auto-injector 5 MG / 0.5 ML inject 0.5 ml subcutaneously at bedtime every Thursday. Discontinued 08/01/25. ? ? 7. 08/01/25: Mounjaro auto-injector 5 MG / 0.5 ML inject 0.5 ml subcutaneously at bedtime every Saturday. Discontinued 08/04/25. ? ? 8. 08/04/25: Mounjaro auto-injector 5 MG / 0.5 ML inject 0.5 ml subcutaneously at bedtime every Thursday. Discontinued 09/19/25. ? ? 9. 09/19/25: Mounjaro auto-injector 5 MG / 0.5 ML inject 0.5 ml subcutaneously one time a day every Thursday. Discontinued 10/03/25. ? ? 10. 10/03/25: Mounjaro auto-injector 5 MG / 0.5ML inject 0.5 ml subcutaneously one time a day every Thursday. (current active order)</p> <p>H. Record review of R #56's medication administration record (MAR) revealed R #56 missed her mounjaro injectable medications on 04/17/25, 07/31/25, and 08/21/25.</p> <p>I. On 01/26/26 at 9:31 am during an interview with R #56, she stated the facility is not consistently giving her mounjaro medications. R #56 stated she is to receive the injection once a week, some weeks the medication is not available, and we just skip that dose.?</p> <p>J. On 01/26/25 at 09:50 am during an interview with the Assistant Director of Nursing (ADON), she stated they were having a hard time getting medications from the pharmacy due to insurance pre-authorization. ADON confirmed R #56's missed her mounjaro injectable medications; The medication was not available on 04/17/25, and 08/21/25 doses, and for the 07/31/25 dose, the medication arrived on 08/04/25 and R #56 refused the medication because it was too close to her next dose. The ADON also stated that the nurses should be able to request the medication from the pharmacy as soon as they found out it was not available and it did not happen. ?</p> <p>R #90</p> <p>K. Record review of R #90's facesheet revealed she was admitted on [DATE] with the following diagnoses (including but not limited to): ? ? 1. Hemiplegia (paralysis of one side of the body) and hemiparesis (weakness on one side of the body) following unspecified cerebrovascular disease (various medical conditions that impact the blood vessels in the brain) affecting right dominant side. ? ? 2. Vascular dementia (a type of cognitive impairment cause by reduced blood flow to the brain, leading to memory loss, confusion and changes in behavior), unspecified severity, with other behavioral disturbance ? ? 3. Aphasia (disorder that affects language abilities due to brain damage) following cerebral infarction. ? ? 4. Dysphagia (difficulty swallowing) following cerebral infarction.</p> <p>L. Record review of R #90's physician's order revealed a dietary order dated 01/08/25 for a scoop plate (a specialized plate designed to assist individuals who have difficulty using regular plates) and sippy cup for hot beverages.</p> <p>M. On 01/27/26 at 12:35 pm during an observation in the dining room, R #90 was served hot coffee in a regular cup. Further observation revealed the dietary meal slip indicated sippy cup for hot beverages.</p> <p>N. On 01/27/26 at 12:36 pm during an interview with admission's coordinator (AC), she confirmed the hot coffee was served in a regular cup. AC stated that per R #90's dietary order all hot beverages</p> <p>(continued on next page)</p>		

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<p>F 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>should be served in a sippy cup and it did not happen.</p> <p>R #5:</p> <p>O. Record review of R #5's face sheet revealed he was admitted on [DATE] with the following diagnoses (including but not limited to):</p> <ul style="list-style-type: none"> <li>-Multiple Sclerosis (is a chronic neurological disorder), Unspecified.</li> <li>-Type 2 Diabetes Mellitus without complications.</li> <li>-Muscle Weakness (Generalized)</li> <li>-Unspecified rotator cuff tear or rupture (is a common cause of shoulder pain and disability among adults) of right shoulder, no specified at traumatic.</li> </ul> <p>P. Record review of R #5's care plan dated 07/03/25, revealed Built -Up-Utensils for all meals.</p> <p>Q. Record review of R #5's physician's order did not reveal an order for Built-Up-Utensils.?</p> <p>R. On 1/26/26 at 12:34 pm, during an interview with Occupational Therapist (OT), he stated he does an evaluation for built-up-utensils and will notify dietitian and dietary and they will put it on the computer for their meal tickets. He further stated, ultimately if a resident needs built-up-utensils for a long period of time a physician's order is needed for it.</p> <p>R #93:</p> <p>S. Record review of R #93's face sheet revealed he was admitted on [DATE] with the following diagnoses (including but not limited to):</p> <ul style="list-style-type: none"> <li>-Alzheimer's Disease (is the most common form of dementia, a brain disorder that slowly destroys a person's memory and thinking skills) with late onset.</li> <li>-Vascular Dementia (is a type of dementia caused by reduced or blocked blood flow to the brain, leading to brain cell damage and cognitive decline), Unspecified severity, without behavioral disturbance, mood disturbance, and anxiety (mental health conditions that cause fear, dread and other symptoms that are out of proportion to the situation).</li> <li>-Psychophysiologic Insomnia (is a chronic sleep disorder where heightened mental, emotional, or physical arousal and learned sleep-preventing associations make it difficult to fall or stay asleep).</li> <li>-Unspecified hearing loss (is the partial or complete inability to hear sounds in one or both ears, which can significantly impact communication and quality of life), unspecified ear.</li> </ul> <p>T. Record review of R #93's care plan dated 11/19/25, revealed rehab eating devices, scoop plate during meals.</p> <p>U. Record review of R #93's physician's order dated 03/20/23 did not reveal an order for scoop plate during meals.?</p> <p>(continued on next page)</p>		

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<p>F 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>V. On 1/26/26 at 12:34 pm, during an interview with Occupational Therapist (OT), he stated he does an evaluation for built-up-utensils and will notify dietitian and dietary and they will put it on the computer for their meal tickets. He further stated, ultimately if a resident needs built-up-utensils for a long period of time a physician's order is needed for it.</p> <p>R #104:</p> <p>W. Record review of R #104's face sheet revealed he was admitted on [DATE] with the following diagnoses (including but not limited to):</p> <ul style="list-style-type: none"> <li>-Contracture (abnormal shortening of muscle tissue, rendering the muscle highly resistant to stretching), left hand.</li> <li>-Orthostatic Hypotension (blood pressure fall when standing from the supine [lying flat] to the erect [upright] position).</li> <li>-Restless Legs syndrome (is a condition that causes a very strong urge to move the legs).</li> <li>-Presence of Neurostimulator (An implantable neurostimulator is a surgically placed device about the size of a stopwatch. It delivers mild electrical signals to the epidural space near your spine through one or more thin wires, called leads).</li> </ul> <p>X. Record review of R #104's care plan dated 02/24/24, revealed Built -Up-Utensils for all meals.</p> <p>Y. Record review of R #104's physician's order did not reveal an order for Built-Up-Utensils.?</p> <p>Z. On 1/26/26 at 12:34 pm, during an interview with Occupational Therapist (OT), he stated he does an evaluation for built-up-utensils and will notify dietitian and dietary and they will put it on the computer for their meal tickets. He further stated, ultimately if a resident needs built-up-utensils for a long period of time a physician's order is needed for it.</p>		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate pressure ulcer care and prevent new ulcers from developing.</p> <p>Based on record review, and interview, the facility failed to meet the professional standards of practice required to prevent skin breakdown for 1 (R #132) of 1 (R #132) resident reviewed for skin assessments when the facility failed to:Ensure a Braden Scale assessment was completed upon admission-Accurately utilize standardized tools such as the Braden Scale (nursing assessment tool used to estimate a patient's risk of developing pressure injuries (pressure ulcers)).-The lack of documented off-loading (Offloading is crucial for preventing pressure ulcers, particularly in individuals with limited mobility or those confined to a bed or wheelchair. By redistributing pressure away from vulnerable areas, offloading helps mitigate the risk of pressure ulcer development) coccyx (tailbone, the last bone at the end of the spine) directly contributed to the tissue necrosis (death of body tissue).These deficient practices led to the development of pressure injury to the coccyx area.The findings are:A. Refer to F0641 for related findings.B. Record review of R #132's Electronic Medical Records (EMR) revealed the following: 1. Braden Scale (a nursing assessment tool used to estimate a patient's risk of developing pressure injuries (pressure ulcers) were done on 04/01/23, 04/08/23, and 04/14/23. Further review of the facility Braden scale instructions was to be completed on resident move-in. 2. No Braden scale assessment was done on R #132 move-in date.C. Record review of R #132's careplan dated 04/28/23 revealed R #132 is at risk for skin breakdown related to decreased activity, impaired cognition, limited mobility, poor safety awareness, incontinence, sheer or friction, informed refusals of care, and recent surgery to the right hip was identified on 03/28/23. Intervention of turn and reposition every 1 to 2 hours was added only 04/01/23. D. On 01/27/26 at 09:02 am during an interview with the Assistant Director of Nursing (ADON), she stated that Braden Scale assessments are done on admission and it did not happen for R #132.</p>		