

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 325062	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/23/2025
NAME OF PROVIDER OR SUPPLIER Paloma Springs Healthcare LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 1400 North Silver Street T OR C, NM 87901	

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 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Protect each resident from the wrongful use of the resident's belongings or money.</p> <p>49313</p> <p>Past noncompliance</p> <p>Based on record review and interview, the facility failed to prevent staff to resident exploitation when Activity Aide (AA) #1 used R #16's bank debit card to make an unauthorized (without the account holders permission) money withdrawals or purchases for 1 (R #16) of 3 (R #16, R #17, and R #18) residents reviewed for abuse, neglect, and exploitation. This deficient practice could likely result in residents not having money available when they need it, psychosocial distress, and a loss of trust in staff. The findings are:</p> <p>A. Record review of the facility's self report, dated 09/13/24, revealed the following:</p> <ol style="list-style-type: none"> 1. The self-report was submitted to the State Agency due to allegations of misappropriation (wrongful use of another's belongings, money, etc.) of funds for R #16. 2. R #16's Power of Attorney (POA, the authority to act for another person in specified or all legal or financial matters) reported that R #16's bank account was missing nearly \$3,000 and there were multiple suspicious (showing a cautious distrust) charges. 3. The police were called and started an investigation. <p>B. Record review of the 5 day follow-up report, dated 09/19/24, revealed the following:</p> <ol style="list-style-type: none"> 1. The facility assisted R #16 with obtaining six months of bank statements. 2. R #16's POA identified charges from a phone company that did not match R #16's phone provider and other charges for vendors R #16 does not shop with. 3. The administrator went over the suspicious charges on the bank statements with the R #16. 4. R #16's POA had R #16's debit card shut off and replaced with a new card. 5. Staff were instructed that only the Activities Director would be allowed to use residents debit cards for shopping. <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 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>6. Residents who use their debit cards for shopping were encouraged to only give their debit card to the Activities Director for shopping.</p> <p>7. The Activity Department used a dual signature system to verify shopping lists match receipts.</p> <p>8. The police began an investigation.</p> <p>9. The police were waiting for video footage from local businesses and an ATM machine to identify the individual who used R #16 debit card without authorization.</p> <p>C. Record review of the follow-up to 5 day report, dated 12/10/24, revealed the following:</p> <p>1. The police detective used security footage from local vendors to identify AA #1 as the individual who used R #16's debit card.</p> <p>2. The investigation revealed that AA #1 had used R #16's debit card to purchase the following:</p> <ul style="list-style-type: none"> i. Gas ii. Groceries iii. Baby clothes iv. Alcohol v. Various other personal items. <p>3. The facility attempted to reach AA #1 to notify her that she was terminated, but her phone number was not valid.</p> <p>4. A criminal complaint was filed against AA #1 for fraud.</p> <p>5. An arrest warrant was served to AA #1 on 11/20/24 and she was arrested.</p> <p>6. During the facility investigation, the facility identified that AA #1 had been destroying documents and receipts.</p> <p>D. Record review of the Activity Director (AD) written statement, no date, revealed the following:</p> <p>1. On 09/07/24, the AD was notified by an AA #2 that R #16's debit card was found on the printer in the activity office.</p> <p>2. R #16 told the AD that AA #1 was supposed to go to the store and purchase some items for R #16.</p> <p>3. R #16 told the AD that she had not received her debit card or her items.</p> <p>(continued on next page)</p>

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<p>F 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>5. The police investigated and identified AA #1 as the person who had used R #16's debit card.</p> <p>6. AA #1 was arrested.</p> <p>7. AA #1 was terminated.</p> <p>8. At the time of the incident, the activities department had the AD and two Activities Aides.</p> <p>9. At the time, anyone in activities could go shopping for residents.</p> <p>10. They found that several of the shopping lists were not filled out completely and not signed by the staff or residents.</p> <p>11. The facility instituted a new process that only the AD is allowed to shop for residents.</p> <p>12. The AD kept a binder with all the resident shopping lists and the shopping lists must be signed by the resident and the AD at the time the resident provides their form of payment.</p> <p>13. After the purchases are complete, the AD returns the resident's card or change and reviews the receipt with the resident.</p> <p>14. The resident and the AD sign the form indicating that the resident received their card or change and the receipt.</p> <p>15. The AD completes an audit at the end of the month to ensure all the forms are filled out completely.</p> <p>G. On 01/23/25 at 11:51 AM, during an interview with the administrator, the following was revealed:</p> <p>1. All staff were retrained on abuse, neglect, and exploitation on 10/09/24.</p> <p>2. All staff were educated on 10/09/24 about the facility shopping process and that the AD is the only staff member who is allowed to shop for residents.</p> <p>3. All staff were educated on 10/09/24 that they are not to accept residents money or payment cards.</p> <p>H. On 01/23/25 at 1:54 PM, during an interview with the AD, the following was revealed:</p> <p>1. All residents who have the facility shop for them have been educated on the shopping process.</p> <p>2. All residents who have the facility shop for them have been advised to only give their method of payment to the AD.</p> <p>3. During Resident Council meetings, on 10/08/24, 11/12/24, 12/12/24, and 01/07/25, the facility reviewed the shopping process.</p> <p>(continued on next page)</p>		

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<p>F 0602</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>4. When resident's turn in their shopping lists, the activities staff will review the shopping process including that the resident's are to only give their method of payment to the AD.</p> <p>This deficient practice was cited as past noncompliance:</p> <p>Based on the facility's investigation of R #16's exploitation, the following interventions were implemented prior to survey investigation which included:</p> <p>The facility shopping process was revised to include that only the Activity Director (AD) is allowed to shop for residents and use the residents financial cards for authorized purchases. Shopping list forms must be filled out completely and signed by the resident and AD at the time the residents card or change is returned. The AD conducts monthly audits to ensure that all residents cards, change, and receipts were returned to the residents.</p> <p>-Record review of the facility's shopping list forms, multiple dates, revealed all of the shopping list forms were filled out completely and signed by the AD and the resident to confirm residents received their card and receipt.</p> <p>-Record review of the facility's audit report forms for October 2024, November 2024, and December 2024 revealed the shopping list forms were filled out completely and included the appropriate signatures.</p> <p>Staff educated residents on the revised facility shopping process. Completed 10/08/24.</p> <p>-Record review of the Resident Council Meeting Minutes, dated 10/08/24, revealed the residents were educated about the revised facility shopping process and how to file a grievance.</p> <p>Staff education on abuse, neglect, and exploitation and revised facility shopping process. Completed on 10/09/24.</p> <p>- Record review of the Staff Meeting Minutes, dated 10/09/24, revealed staff were educated on Abuse, Neglect, and Exploitation and the revised facility shopping process.</p> <p>Activity Director completed audits monthly during the months of October 2024, November 2024, and December 2024 to ensure the return of debit cards, change, and receipts to the residents. Completed on 10/28/24.</p> <p>-Record review of the Resident Shopping lists, multiple dates, revealed all shopping list forms, were filled out completely and signed by the resident and AD.</p> <p>-Surveyor verified the implementation of the revised facility shopping process and did not identify any further non-compliance with samples residents (R #17 and R #18).</p>		