

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 08/19/2025
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)
F 0842 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards. (continued on next page)

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 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review and interview, the facility failed to ensure medical records were complete and accurate for 1 (R #1) of 3 (R #1, R #2 and R #3) residents reviewed for documentation accuracy. This deficient practice has the potential to have a negative impact on the care staff provide to residents due to missing or inaccurate records and resident information. The findings are: A. Record review of R #1's admission record (no date) revealed the following: 1. R #1 was admitted to the facility on [DATE]. 2. R #1 had the following diagnoses: a. Chronic Obstructive Pulmonary Disease (COPD, a group of lung diseases that cause airflow obstruction and breathing problems) with acute exacerbation (a sudden worsening of symptoms in a chronic condition). b. Respiratory failure unspecified whether with hypoxia or hypercapnia (condition where you do not have enough oxygen in the tissues in your body [hypoxia] or when you have too much carbon dioxide in your blood [hypercapnia]). B. Record review of R #1's care plan dated 01/08/25 revealed the following: 1. Focus: R #1 has pain. Goal: R #1's pain will be kept to minimal (mild and barely noticeable). Approaches (actions taken by facility staff): Monitor/Record pain characteristics: Quality (nature of pain, describing how it feels, such as sharp, dull, throbbing, or burning), severity (intensity of pain, determine by 0-10 scale; 0 is no pain and 10 is the worst pain imaginable), anatomical location (where on the body the pain is occurring), onset (when the pain began), duration (how long the pain lasts), aggravating factors (what makes pain worse), relieving factors (what helps decrease pain). 2. Focus: R #1 has COPD. Goal: R #1's medical conditions will be managed on a daily basis. Approaches (actions taken by facility staff): administer PRN meds, listen to lungs sounds PRN, check oxygen saturation PRN, notify family and doctor of respiratory distress. C. Record review of R #1's nursing progress notes revealed the following: 1. 04/12/25 at 3:40 AM, R #1 complained of shortness of breath (SOB; not being able to get enough air, chest tightness or working harder to breathe). The nurse administered PRN albuterol inhaler (inhaled medication that relaxes muscles in the airways which helps to open them up an make it easier to breathe). 2. 04/12/25 at 3:41 AM, R #1 was given hydroxyzine (medication that helps relieve allergies and has a sedative effect that helps decrease anxiety) for complaints of shortness of breath. 3. 04/12/25 at 4:17 AM, albuterol inhaler and hydroxyzine effective (helped alleviate the symptoms). 4. 04/12/25 at 4:21 AM, the resident reported shortness of breath and anxiety. The nurse administered PRN albuterol inhaler and hydroxyzine and notified the on-call provider. R #1 refused to go to the emergency room. 5. 04/12/25 at 7:08 AM, R #1 requested and was given acetaminophen (pain reliever and fever reducer used to treat mild to moderate pain and reduce fever) for complaint of headache. 6. 04/12/25 at 8:01 AM, acetaminophen effective resident reports no pain or discomfort at this time. 7. 04/12/25 at 4:19 PM, R #1 requested and was given acetaminophen. 8. 04/12/25 at 4:20 PM, R #1 requested and was given albuterol inhaler. 9. 04/12/25 at 5:21 PM, acetaminophen and albuterol inhaler effective resident reports no pain or discomfort at this time. Resident reports no SOB or discomfort at this time. 10. 04/12/25 at 11:54 PM, R #1 was given hydroxyzine. 11. 04/13/25 at 2:40 AM, hydroxyzine effective. 12. 04/13/25 at 4:53 AM resident was given acetaminophen. 13. 04/13/25 at 6:20 AM, acetaminophen effective. 14. 04/13/25 at 4:53 PM, R #1 has been short of breath throughout my shift, progressively worsening. Unable to get oxygen above 83-84% (95%-100% oxygen level is considered normal for most adults) this evening, with crackles (abnormal breath sounds that may be heard in the lungs of people with raspatory diseases) in both lower lung bases (bottom of each lung). R #1 also has increased weakness noted this evening. Primary care provider responded with the following feedback: Send to local emergency room via emergency medical services (ambulance). 15. Further record review of R #1's progress notes revealed staff did not document the quality, severity, onset, duration, aggravating factors or relieving factors of pain when they administered acetaminophen for complaints of pain on 04/12/25 at 7:08 AM, 04/12/25 at 4:19 PM, and on 04/13/25 at 4:53 PM. D. On 08/19/25 at 11:42 AM, during an interview, RN #1 stated the following: 1. She was the day shift nurse that worked with R #1 on 04/13/25. 2. On 04/13/25 after lunch (unable to remember the exact time) approximately 12:30 R #1 complained of shortness of breath and anxiety. 3. RN #1 stated this was not an uncommon complaint for R #1, RN #1 further stated R #1 would have increased anxiety related to diagnosis of COPD which causes her to have difficulty breathing. 4. RN #1 stated she administered hydroxyzine to R #1 at approximately 12:30 to help decrease her anxiety and help her to breathe easier. 5. RN #1 stated R #1 received her scheduled nebulizer treatment at approximately the same time (12:30 PM). 6. RN #1 stated she returned to check on R #1 after she had given her the hydroxyzine and scheduled inratronium-albuterol</p>		