

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 325214	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/06/2024
NAME OF PROVIDER OR SUPPLIER Laguna Rainbow Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE 240 Casa Blanca Road Casa Blanca, NM 87007	
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 0580</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48645</p> <p>Based on record review and interview, the facility failed to notify the Power of Attorney (POA; health care power of attorney grants, in writing, a particular agent the power to make healthcare decisions on another's behalf) and health care provider of 1 (R #1) of 1 (R #1) resident reviewed when staff found R#1 with a injury of unknown origin and did not notify the POA and the facility provider within two hours. If the facility is not notifying the resident's POA or provider when the resident has a change of condition, then the POA and provider are unable to make decisions related to treatment and advocate for the resident's care. The findings are:</p> <p>A. Record review of R #1's face sheet, dated 04/30/18, revealed the following:</p> <ul style="list-style-type: none"> - admitted [DATE]. - Dementia (a chronic disease that causes a progressive decline in memory, judgment, including poor decision making). - Parkinson's disease (progressive disorder that affects the nervous system and the parts of the body controlled by the nerves). - Emergency contact #1 and POA - relationship daughter <p>B. Record review of R #1's progress notes revealed the following:</p> <ul style="list-style-type: none"> - Dated 05/27/24 at 9:52 am, Licensed Practical Nurse (LPN) #1 was notified on 05/25/24 that R #1 had an injury of unknown origin to her right ankle and needed to be assessed. - Dated 05/27/24 at 2:17 pm, LPN #1 was notified on 05/25/24 about R #1's injury of unknown origin to her right ankle but got busy. The LPN told an unknown night nurse coming on duty about the ankle injury and did not assess it herself before going home. LPN #1 documented the right ankle injury was not assessed by anyone until 05/27/24, when she came back from days off. The POA and provider were not notified about the injury of unknown origin until 05/27/24 after LPN #1 completed the assessment and required notifications. <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 0580</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>C. On 08/06/24 at 1:15 pm, during an interview with the Director of Nursing (DON), she stated staff did not call R #1's POA or notify the on-call provider about the injury of unknown origin to R #1's right ankle on 05/25/24. The DON stated the staff was expected and required to notify the on-call provider and POA within two hours of being notified of injuries of unknown origin to residents. The DON further stated the required notifications were not made until 05/27/24.</p>		