



Date: September 28, 2012

To: Ramon V. Chavez, Director/Service Coordinator
 Provider: Nezzy Care of Las Cruces
 Address: 780 S. Walnut Street Ste. 7
 State/Zip: Las Cruces, New Mexico 88001-1425
 Email: nezzclc@hotmail.com

Region: Southwest
 Routine Survey: February 6 – 9, 2012
 Verification Survey: September 27, 2012
 Program Surveyed: Developmental Disabilities Waiver
 Service Surveyed: Community Living Supports (Supported Living & Family Living) & Community Inclusion Supports (Community Access)

Survey Type: Verification

Team Leader: Valerie V. Valdez, MS, Healthcare Program Manager, Division of Health Improvement/Quality Management Bureau
 Team Members: MariaElena Chavez, BSW, Healthcare Surveyor, Division of Health Improvement/Quality Management Bureau

Dear Mr. Chavez;

The Division of Health Improvement/Quality Management Bureau has completed a Verification survey of the services identified above. The purpose of the survey was to determine compliance with your Plan of Correction submitted to DHI regarding the Routine Survey on February 6 – 9, 2012. There were no deficiencies noted. The Routine Survey and subsequent Plan of Correction process is now complete. The Division of Health Improvement, Quality Management Bureau has determined your agency is in:

Compliance with Conditions of Participation

This concludes your Survey process. Please call the Plan of Correction Coordinator at 505-699-9356, if you have questions about the survey or the report. Thank you for your cooperation and for the work you perform.

Sincerely,

Valerie V. Valdez, M.S.

Valerie V. Valdez, M.S.
 Healthcare Program Manager/Team Lead
 Division of Health Improvement
 Quality Management Bureau



DIVISION OF HEALTH IMPROVEMENT • QUALITY MANAGEMENT BUREAU

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QMB Report of Findings – Nezzy Care of Las Cruces – Southwest Region – September 27, 2012

Survey Report #: Q.13.1.DDW.52981878.3.001.VER.1.272

Survey Process Employed:

Entrance Conference Date:	September 27, 2012
Present:	<u>Nezzy Care of Las Cruces</u> Ramon V. Chavez, Director <u>DOH/DHI/QMB</u> Valerie V. Valdez, MS, Healthcare Program Manager/Team Lead Mari Chavez, BSW, Healthcare Surveyor
Exit Conference Date:	September 27, 2012
Present:	<u>Nezzy Care of Las Cruces</u> Ramon V. Chavez, Director Vanessa Tarango, Office Manager <u>DOH/DHI/QMB</u> Valerie V. Valdez, MS, Healthcare Program Manager/Team Lead Mari Chavez, BSW, Healthcare Surveyor
Total Homes Visited	Number: 10
❖ Supported Homes Visited	Number: 3
❖ Family Homes Visited	Number: 7
Administrative Locations Visited	Number: 1
Total Sample Size	Number: 10 0 - <i>Jackson</i> Class Members 10 - Non- <i>Jackson</i> Class Members 3 - Supported Living 7 - Family Living 6 - Community Access
Persons Served Records Reviewed	Number: 10
Direct Support Personnel Interviewed	Number: 12
Direct Support Personnel Records Reviewed	Number: 58
Service Coordinator Records Reviewed	Number: 4
Administrative Files Reviewed	<ul style="list-style-type: none">• Medical Records• Personnel Files• Training Records• Caregiver Criminal History Screening Records• Employee Abuse Registry• Quality Assurance / Improvement Plan
CC: Distribution List:	DOH - Division of Health Improvement DOH - Developmental Disabilities Supports Division DOH - Office of Internal Audit HSD - Medical Assistance Division

QMB Report of Findings – Nezzy Care of Las Cruces – Southwest Region – September 27, 2012

QMB Determinations of Compliance

- “Compliance with Conditions of Participation”
The QMB determination of “Compliance with Conditions of Participation,” indicates that a provider is in compliance with all ‘Conditions of Participation,’ (CoP) but may have standard level deficiencies (deficiencies which are not at the condition level) out of compliance. The agency has obtained a level of compliance such that there is a minimal potential for harm to individuals’ health and safety. To qualify for a determination of Compliance with Conditions of Participation, the provider must be in compliance with *all* Conditions of Participation.
- “Partial-Compliance with Conditions of Participation”
The QMB determination of “Partial-Compliance with Conditions of Participation” indicates that a provider is out of compliance with one (1) to three (3) ‘Conditions of Participation.’ This partial-compliance, if not corrected, may result in a serious negative outcome or the potential for more than minimal harm to individuals’ health and safety. The Agency may also have standard level deficiencies (deficiencies which are not at the condition level).

Providers receiving a repeat determination of ‘Partial-Compliance’ for repeat deficiencies of CoPs may be referred by the Quality Management Bureau to the Internal Review Committee (IRC) for consideration of remedies and possible actions.

- “Non-Compliant with Conditions of Participation”:
The QMB determination of “Non-Compliance with Conditions of Participation,” indicates a provider is significantly out of compliance with Conditions of Participation and/or has:
 - Four (4) Conditions of Participation out of compliance.
 - Multiple findings of widespread non-compliance with any standard or regulation with a significant potential for more than minimal harm.
 - Any finding of actual harm or Immediate Jeopardy.The Agency may also have standard level deficiencies (deficiencies which are not at the condition level).

Providers receiving a repeat determination of ‘Non-Compliance’ will be referred by Quality Management Bureau to the Internal Review Committee (IRC) for consideration of remedies and possible actions.

Agency: Nezzy Care of Las Cruces - Southwest Region
Program: Developmental Disabilities Waiver
Service: Community Living Supports (Supported Living & Family Living) & Community Inclusion Supports (Community Access)
Monitoring Type: Verification Survey
Routine Survey: February 6 – 9, 2012
Verification Survey: September 27, 2012

Standard of Care	February 6 – 9, 2012 Deficiencies	September 27, 2012 Deficiencies Verification Survey – New and Repeat Deficiencies
<i>CMS Assurance – Service Plans: ISP Implementation</i> – Services are delivered in accordance with the service plan, including type, scope, amount, duration and frequency specified in the service plan.		
Tag # 1A08 Agency Case File	Standard Level Deficiency	Completed
Tag # 1A08.1 Agency Case File - Progress Notes	Standard Level Deficiency	Completed
Tag # 1A32 & 6L14 ISP Implementation	Standard Level Deficiency	Completed
Tag # 5I11 Reporting Requirements (Community Inclusion Quarterly Reports)	Standard Level Deficiency	Completed
Tag # 6L14 Residential Case File	Standard Level Deficiency	Completed
Tag # 6L17 Reporting Requirements (Community Living Quarterly Reports)	Standard Level Deficiency	Completed
<i>CMS Assurance – Qualified Providers</i> – The State monitors non-licensed/non-certified providers to assure adherence to waiver requirements. The State implements its policies and procedures for verifying that provider training is conducted in accordance with State requirements and the approved waiver.		
Tag # 1A11.1 Transportation Training	Standard Level Deficiency	Completed
Tag # 1A20 Direct Support Personnel Training	Standard Level Deficiency	Completed
Tag # 1A22 Agency Personnel Competency	<i>Condition of Participation Level Deficiency</i>	Completed

Tag # 1A25 Criminal Caregiver History Screening	Standard Level Deficiency	Completed
Tag # 1A26 Consolidated On-line Registry/Employee Abuse Registry	<i>Condition of Participation Level Deficiency</i>	Completed
Tag # 1A28.1 Incident Mgt. System - Personnel Training	Standard Level Deficiency	Completed
Tag # 1A36 Service Coordination Requirements	Standard Level Deficiency	Completed
Tag # 1A37 Individual Specific Training	Standard Level Deficiency	Completed
<i>CMS Assurance – Health and Welfare – The state, on an ongoing basis, identifies, addresses and seeks to prevent occurrences of abuse, neglect and exploitation. Individuals shall be afforded their basic human rights. The provider supports individuals to access needed healthcare services in a timely manner.</i>		
Tag # 1A09 Medication Delivery (MAR) - Routine Medication	Standard Level Deficiency	Completed
Tag # 1A09.1 Medication Delivery - PRN Medication	Standard Level Deficiency	Completed
Tag # 1A27 Incident Mgt Late & Failure to Report	Standard Level Deficiency	Completed
Tag # 1A33 Board of Pharmacy - Med Storage	Standard Level Deficiency	Completed
Tag # 1A33.1 Board of Pharmacy - Lic	Standard Level Deficiency	Completed
Tag #1A39 Assistive Technology & Adaptive Equipment	Standard Level Deficiency	Completed
Tag # 6L06 Family Living Requirements	Standard Level Deficiency	Completed
Tag # 6L13 Community Living Healthcare Reqts.	Standard Level Deficiency	Completed
Tag # 6L25 Residential Health & Safety (Supported Living & Family Living)	Standard Level Deficiency	Completed
Tag # 1A09 Medication Delivery (MAR) - Routine Medication	Standard Level Deficiency	Completed
Tag # 1A09.1 Medication Delivery - PRN Medication	Standard Level Deficiency	Completed

Tag # 1A27 Incident Mgt Late & Failure to Report	Standard Level Deficiency	Completed
Tag # 1A33 Board of Pharmacy - Med Storage	Standard Level Deficiency	Completed
Tag # 1A33.1 Board of Pharmacy - Lic	Standard Level Deficiency	Completed
Tag #1A39 Assistive Technology & Adaptive Equipment	Standard Level Deficiency	Completed
Tag # 6L06 Family Living Requirements	Standard Level Deficiency	Completed
Tag # 6L13 Community Living Healthcare Reqts.	Standard Level Deficiency	Completed
Tag # 6L25 Residential Health & Safety (Supported Living & Family Living)	Standard Level Deficiency	Completed
<i>CMS Assurance – Medicaid Billing/Reimbursement/Financial Accountability – State financial oversight exists to assure that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver.</i>		
Tag # 5I36 Community Access Reimbursement	Standard Level Deficiency	Completed
Tag # 6L26 Supported Living Reimbursement	Standard Level Deficiency	Completed
Tag # 6L27 Family Living Reimbursement	Standard Level Deficiency	Completed