Las Cruces Village Nursing & Rehabilitation LLC

Report ID: CCN 325067
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§ 1 Facility Identity

Facility	Las Cruces Village Nursing & Rehabilitation LLC
CCN	325067
Location	3025 TERRACE DRIVE, LAS CRUCES, NM, 88011
Ownership type	For profit - Limited Liability company
Certified beds	94

§ 2 CMS Federal Record

Civil money penalties on file	$0
Deficiency citations — current cycle	46 (667% vs prior 24 months (6))
Deficiency citations — prior 24 months	6
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	SFF candidate
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$0
NM state average	$42,745 (this facility is 0.0× the NM average)
National average	$31,239 (this facility is 0.0× the national average)

Averages are CMS-published per-facility fine amounts for the same snapshot. Figures and multiples are stated as published; no inference is drawn here.

§ 4 Current-Cycle Deficiencies

The current survey cycle records the following 46 federal deficiency citations (CMS F-tags). Scope/severity is CMS's own A–L grade; "Immediate Jeopardy" is CMS's most serious classification.

F-TAG	FINDING (CMS)	SCOPE/SEV.	SOURCE
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	F	Complaint
F727	Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.	F	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F882	Designate a qualified infection preventionist to be responsible for the infection prevent and control program in the nursing home.	F	Standard survey
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	E	Complaint
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	E	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	E	Complaint
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	E	Complaint
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	E	Standard survey

F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	E	Standard survey
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	E	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	E	Standard survey
F679	Provide activities to meet all resident's needs.	E	Standard survey
F680	Ensure the activities program is directed by a qualified professional.	E	Standard survey
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	E	Standard survey
F791	Provide or obtain dental services for each resident.	E	Standard survey
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	E	Standard survey
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	E	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	E	Standard survey
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	E	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	E	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	Complaint
F551	Give the resident's representative the ability to exercise the resident's rights.	D	Complaint

F573	Let each resident or the resident's legal representative access or purchase copies of all the resident's records.	D	Complaint
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F610	Respond appropriately to all alleged violations.	D	Complaint
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Standard survey
F627	Ensure the transfer/discharge meets the resident's needs/preferences and that the resident is prepared for a safe transfer/discharge.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey

F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	D	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Standard survey
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	D	Standard survey
F849	Arrange for the provision of hospice services or assist the resident in transferring to a facility that will arrange for the provision of hospice services.	D	Standard survey
F948	Ensure that paid feeding assistants have the training they need.	D	Standard survey
F575	Post a list of names, addresses, and telephone numbers of all pertinent State agencies and advocacy groups and a statement that the resident may file a complaint with the State Survey Agency.	C	Complaint
F732	Post nurse staffing information every day.	C	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: OPCO SKILLED MANAGEMENT (66 facilities); Owner on file: 3025 NM HOLDINGS LLC (organization)
Ownership chain	OPCO SKILLED MANAGEMENT (66 facilities)
Penalties vs chain average	$0 vs $50,228 (0.0× the chain average)
Current deficiencies vs chain average	46 vs 14.2 (3.2× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.9 · US avg 3)
Health inspection	1 / 5 (state avg 2.7 · US avg 2.8)
Staffing	2 / 5 (state avg 2.8 · US avg 2.9)
Quality measures (QM)	4 / 5 (state avg 3.9 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/325067
Snapshot SHA-256	afce036691101a3203803423cb8a912507c05d6189e312a4fd9e5a5c4d4c3d21
Methodology & version	v1.0 — https://www.caregiverhelpnow.com/methodology

§ 8 For Your Attorney

1. The full survey file (Form 2567) for each inspection cited above is available from the state survey agency or by FOIA request.
2. Quarterly staffing data: CMS Payroll-Based Journal (PBJ) public use files, CCN 325067.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash afce03669110.
4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).

This snapshot is a frozen record of CMS Care Compare data as of Jun 2026. Independently verifiable at the URL above. Generated by CareSentinel under Nodal Logics LLC. Compiled under CareSentinel methodology v1.0, documented at https://www.caregiverhelpnow.com/methodology; the Snapshot SHA-256 above pins this record to that methodology version.

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