

Mescalero Care Center

Report ID: CCN 325116
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§ 1 Facility Identity

Facility	Mescalero Care Center
CCN	325116
Location	454 Lipan Avenue, Mescalero, NM, 88340
Ownership type	Non profit - Other
Certified beds	40

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	33 (3200% vs prior 24 months (1))
Deficiency citations — prior 24 months	1
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 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 33 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
F801	Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.	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
F568	Properly hold, secure, and manage each resident's personal money which is deposited with the nursing home.	E	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	E	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	E	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	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
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	E	Standard survey
F641	Ensure each resident receives an accurate assessment.	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
F658	Ensure services provided by the nursing facility meet professional standards of quality.	E	Standard survey
F679	Provide activities to meet all resident's needs.	E	Standard survey

F712	Ensure that the resident and his/her doctor meet face-to-face at all required visits.	E	Standard survey
F730	Observe each nurse aide's job performance and give regular training.	E	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.	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
F942	Ensure that staff members are educated on resident rights and facility responsibilities to properly care for its residents.	E	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	E	Standard survey
F945	Include as part of its infection prevention and control program, mandatory training that includes written standards, policies, and procedures for the program.	E	Standard survey
F947	Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.	E	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Standard survey
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	D	Standard survey

F637	Assess the resident when there is a significant change in condition	D	Standard survey
F638	Assure that each resident's assessment is updated at least once every 3 months.	D	Standard survey
F640	Encode each resident's assessment data and transmit these data to the State within 7 days of 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
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	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
F943	Give their staff education on dementia care, and what abuse, neglect, and exploitation are; and how to report abuse, neglect, and exploitation.	D	Standard survey
F949	Provide behavior health training consistent with the requirements and as determined by a facility assessment.	D	Standard survey

§ 5 Ownership

Ownership record	Owner on file: MESCALERO APACHE TRIBE (organization)
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§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.9 · US avg 3)
Health inspection	2 / 5 (state avg 2.7 · US avg 2.8)
Staffing	1 / 5 (state avg 2.8 · US avg 2.9)
Quality measures (QM)	0 / 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/325116
Snapshot SHA-256	db78807a78682985c47e1d910f9d79baf4627b4898959d3f7910ba2d6fe9a96f
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 325116.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash db78807a7868.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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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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