DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	265481	A. BUILDING 01 B. WING _____	11/12/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PIN OAKS LIVING CENTER	1525 WEST MONROE MEXICO, MO 65265

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
E 000	Initial Comments An Emergency Preparedness Survey was conducted by Healthcare Management Solutions, LLC on behalf of the State of Missouri, Department of Health and Senior Services on 11/12/24. The facility was found to be in compliance with 42 CFR 483.73.	E 000		
K 000	INITIAL COMMENTS A Life Safety Code Survey was conducted by Healthcare Management Solutions, LLC on behalf of the State of Missouri, Department of Health and Senior Services on 11/12/24 and was found to be in noncompliance with the requirements for participation in Medicare/Medicaid at 42 CFR 483.90(a), Life Safety from Fire, and the 2012 Edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 19 EXISTING Health Care Occupancy.	K 000		
K 222 SS=F	Egress Doors CFR(s): NFPA 101 Egress Doors Doors in a required means of egress shall not be equipped with a latch or a lock that requires the use of a tool or key from the egress side unless using one of the following special locking arrangements: CLINICAL NEEDS OR SECURITY THREAT LOCKING Where special locking arrangements for the clinical security needs of the patient are used, only one locking device shall be permitted on each door and provisions shall be made for the rapid removal of occupants by: remote control of locks; keying of all locks or keys carried by staff at all times; or other such reliable means available	K 222		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Brittany Ulrich | Administrator | 12-13-2024

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.

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K 222	Continued From page 1 to the staff at all times. 18.2.2.2.5.1, 18.2.2.2.6, 19.2.2.2.5.1, 19.2.2.2.6 SPECIAL NEEDS LOCKING ARRANGEMENTS Where special locking arrangements for the safety needs of the patient are used, all of the Clinical or Security Locking requirements are being met. In addition, the locks must be electrical locks that fail safely so as to release upon loss of power to the device; the building is protected by a supervised automatic sprinkler system and the locked space is protected by a complete smoke detection system (or is constantly monitored at an attended location within the locked space); and both the sprinkler and detection systems are arranged to unlock the doors upon activation. 18.2.2.2.5.2, 19.2.2.2.5.2, TIA 12-4 DELAYED-EGRESS LOCKING ARRANGEMENTS Approved, listed delayed-egress locking systems installed in accordance with 7.2.1.6.1 shall be permitted on door assemblies serving low and ordinary hazard contents in buildings protected throughout by an approved, supervised automatic fire detection system or an approved, supervised automatic sprinkler system. 18.2.2.2.4, 19.2.2.2.4 ACCESS-CONTROLLED EGRESS LOCKING ARRANGEMENTS Access-Controlled Egress Door assemblies installed in accordance with 7.2.1.6.2 shall be permitted. 18.2.2.2.4, 19.2.2.2.4 ELEVATOR LOBBY EXIT ACCESS LOCKING ARRANGEMENTS Elevator lobby exit access door locking in accordance with 7.2.1.6.3 shall be permitted on door assemblies in buildings protected throughout	K 222		

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K 222	Continued From page 2 by an approved, supervised automatic fire detection system and an approved, supervised automatic sprinkler system. 18.2.2.2.4, 19.2.2.2.4 This REQUIREMENT is not met as evidenced by: Based on observation and interview, the facility failed to ensure three of 10 egress doors equipped with delayed egress locking hardware unlocked and opened when pressure was applied in accordance with NFPA 101 Life Safety Code (2012 Edition) Section 7.2.1.6.1.1. This deficient practice had the potential to affect all 69 residents who resided at the facility. The facility capacity was 124 and the census was 72. 1. Observation on 11/14/24 between 12:36 P.M. and 3:07 P.M. of the rehabilitation unit, 200 unit, and the 400 unit showed three exit access doors equipped with delayed egress locking hardware would not open when pressure was applied for at least 15 seconds. During an interview at the time of the observations, the Maintenance Director confirmed the three egress doors did not release when pressure was applied. The Maintenance Director said he had to adjust the magnets on the doors daily. Review of NFPA 101, 2012 edition, Section 7.2.1.6.1.1 showed approved, listed, delayed-egress locking systems shall be permitted to be installed on door assemblies serving low and ordinary hazard contents in buildings protected throughout by an approved, supervised automatic fire detection system in accordance with Section 9.6 or an approved, supervised automatic sprinkler system in	K 222		

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K 222	Continued From page 3 accordance with Section 9.7, and where permitted in Chapters 11 through 43, provided that all of the following criteria are met: (1) The door leaves shall unlock in the direction of egress upon actuation of one of the following: (a) Approved, supervised automatic sprinkler system in accordance with Section 9.7 (b) Not more than one heat detector of an approved, supervised automatic fire detection system in accordance with Section 9.6 (c) Not more than two smoke detectors of an approved, supervised automatic fire detection system in accordance with Section 9.6 (2) The door leaves shall unlock in the direction of egress upon loss of power controlling the lock or locking mechanism. (3)*An irreversible process shall release the lock in the direction of egress within 15 seconds, or 30 seconds where approved by the authority having jurisdiction, upon application of a force to the release device required in 7.2.1.5.10 under all of the following conditions: (a) The force shall not be required to exceed 15 lbf (67 N). (b) The force shall not be required to be continuously applied for more than 3 seconds. (c) The initiation of the release process shall activate an audible signal in the vicinity of the door opening. (d) Once the lock has been released by the application of force to the releasing device, relocking shall be by manual means only.	K 222		
K 511 SS=D	Utilities - Gas and Electric CFR(s): NFPA 101 Utilities - Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code,	K 511		

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K 511	Continued From page 4 electrical wiring and equipment complies with NFPA 70, National Electric Code. Existing installations can continue in service provided no hazard to life. 18.5.1.1, 19.5.1.1, 9.1.1, 9.1.2 This REQUIREMENT is not met as evidenced by: Based on observation and interview, the facility failed to ensure wiring maintained in flexible metal conduit (FMC) that exited an electrical panel was secured within 12 inches of the panel in accordance with NFPA 70 National Electrical Code (2011 Edition) Article 348.30. The facility capacity was 124 and the census was 72. 1. Observation on 11/12/24 at 12:36 P.M., showed flexible metal conduct (FMC) exited the main electrical panel and led to the controller for the water softener. The FMC was not secured and fastened in place within 12 inches of the panel or within 12 inches of the controller for the water softener. During an interview at the time of the observation, the Maintenance Director verified the FMC wiring was not secured. Review of NFPA 70, National Electrical Code, 2011 edition, Article 348.30 showed the following: -Securing and Supporting. FMC shall be securely fastened in place and supported in accordance with 348.30(A) and (B). -Securely Fastened. FMC shall be securely fastened in place by an approved means within	K 511		

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K 511	Continued From page 5 300 mm (12 in.) of each box, cabinet, conduit body, or other conduit termination and shall be supported and secured at intervals not to exceed 1.4 m (41/2 ft).	K 511		

PLAN OF CORRECTION

Provider/Supplier Name:	Pin Oaks Living Center
Street Address, City, Zip:	1525 West Monroe St., Mexico, MO 65265
Date of Survey:	11/12/2024

PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER	265481

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K 222	The facility will ensure egress doors are equipped with delayed egress locking hardware that unlock and open when pressure is applied in accordance with NFPA 101 Life Safety Code (2012 Edition) Section 7.2.1.6.1.1. All residents are potentially at risk.	
	Corrective Measures: 1. Maintenance to contact vendor to schedule service for them to evaluate and correct delayed egress doors on 200-unit, 400-unit, and rehabilitation units	
	Measures put into place: 1. Maintenance to work with vendor to be in compliance by completing service to doors by 12/27/2024. 2. Maintenance to audit egress doors weekly x 3 months.	12/27/2024
	How the facility plans to monitor: 1. Maintenance to bring audit for 3 months to QAPI meetings. After 3 months, it will be evaluated to see if further monitoring is needed.	

The Administrator signing and dating the first page of the CMS-2567/State Form is indicating their approval of the plan of correction being submitted on this form.

PLAN OF CORRECTION

Provider/Supplier Name:	Pin Oaks Living Center
Street Address, City, Zip:	1525 West Monroe St., Mexico, MO 65265
Date of Survey:	11/12/2024

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K 511	The facility will ensure wiring maintained in flexible metal conduit (FMC) that exits electrical panels are secured within 12 inches of the panels in accordance with NFPA 70 National Electrical Code (2011 Edition) Article 348.30. All residents are potentially at risk.	
	Corrective Measures: 1. Secured metal conduit exiting electrical panel with galvanized pipe straps.	
	Measures put into place: 1. Maintenance to audit electrical panel to ensure conduits are secure weekly x 3 months.	12/23/2024
	How the facility plans to monitor: 1. Maintenance to bring audit for 3 months to QAPI meetings. After 3 months, it will be evaluated to see if further monitoring is needed.	

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