

Missouri Department of Health and Senior Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 28997	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/31/2025
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NAME OF PROVIDER OR SUPPLIER LAKE GEORGE ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 5000 EAST RICHLAND ROAD COLUMBIA, MO 65201
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(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) COMPLETE DATE
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A2283	<p>19 CSR 30-86.022(14)(A) Smoking in Designated Areas & Supervised</p> <p>Smoking. (A) Smoking shall be permitted in designated areas only. Areas where smoking is permitted shall be designated as such and shall be supervised either directly or by a resident informing an employee of the facility that the area is being used for smoking. II/III</p> <p>This regulation is not met as evidenced by: Class III</p> <p>Based on observation, interview, and record review, facility staff failed to provide non-combustible ashtrays and non-combustible receptacles to dispose cigarette butts in two areas used for smoking. The facility census was eight.</p> <p>1. Review of the facility's Smoking policy, undated, showed smoking is strictly prohibited inside the building and the residents who choose to smoke can enjoy this outside or in a specifically designated place.</p> <p>2. Observation on 10/31/25 at 11:25 A.M., showed Resident #1 smoked in his/her bedroom while he/she sat in his/her recliner. Observation showed Certified Medication Aid (CMA) A told the resident he/she is not supposed to smoke inside and asked the resident to go outside to his/her back patio to where he/she is supposed to smoke.</p> <p>During an interview on 10/31/25 at 1:20 P.M., the Dietary Manager said the resident is supposed to smoke on his/her back patio and staff are supposed to smoke by the big tree in between the assisted living building and the independent</p>	A2283		
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Missouri Department of Health and Senior Services
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Brenda Gyll

Administrator

TITLE

(X6) DATE

11/26/25

Missouri Department of Health and Senior Services

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A2283	<p>Continued From page 1</p> <p>living building. He/She said the resident is supposed to get the cigarette butt wet and throw it in the trash and said staff puts their cigarette butts out and then throws them in the trash.</p> <p>During an interview on 10/31/25 at 1:22 P.M., CMA B said the resident usually smokes on his/her back patio, but the resident gets confused often. He/She said staff are supposed to smoke by the big tree in between the assisted living building and the independent living building. CMA B said the resident and staff get their cigarette butt wet and throws the butts into the trash.</p> <p>During an interview on 10/31/25 at 1:22 P.M., CMA B said the resident usually smokes on his/her back patio, but the resident gets confused often. He/She said staff are supposed to smoke by the big tree in between the assisted living building and the independent living building. CMA B said the resident and staff get their cigarette butt wet and throws the butts into the trash.</p> <p>Observation on 10/31/25 at 1:27 P.M., showed a big tree in between the assisted living building and the independent living building. Observation showed the area did not contain non-combustible ash trays and did not contain a non-combustible receptacle to dispose cigarette butts.</p> <p>Observation on 10/31/25 at 1:29 P.M., showed the residents back patio did not contain a non-combustible ash tray and did not contain a non-combustible receptacle to dispose cigarette butts.</p> <p>During an interview on 10/31/25 at 1:41 P.M., the Executive Director said the resident is supposed to smoke on his/her back patio and staff are</p>	A2283		

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A2283	Continued From page 2 supposed to smoke by the big tree or in their car. He/She said the resident and staff are supposed to get the butt wet and throw them into the trash. The Executive Director said he/she did not realize the smoking areas had to contain non-combustible ash trays and non-combustible receptacles and thought they just had to be away from the building.	A2283		
A4776	19 CSR 30-86.047(35) Protective Oversight Protective oversight shall be provided twenty-four (24) hours a day. For residents departing the premises on voluntary leave, the facility shall have, at a minimum, a procedure to inquire of the resident or resident ' s guardian of the resident ' s departure, of the resident ' s estimated length of absence from the facility, and of the resident ' s whereabouts while on voluntary leave. I/II This regulation is not met as evidenced by: Class II Based on observation, interview, and record review, facility staff failed to assess one resident (Resident #1) to determine if the resident could smoke cigarettes safely, independently and without staff supervision. The facility census was eight. 1. Review of the facility's Smoking policy, undated, showed the following: -The facility's nursing staff will complete a smoking assessment; -A physician order for approval to smoke will be obtained; -Smoking is strictly prohibited inside the building; -The residents who choose to smoke can enjoy	A4776		

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A4776	<p>Continued From page 3</p> <p>this outside or in a specifically designated place.</p> <p>2. Review of Resident #1's Community Based Assessment, dated 05/04/24, showed staffed assessed the resident as having some memory lapse regarding memory/recall, judgement and orientation to date, day, and place.</p> <p>Review of the resident's medical record on 10/31/25, showed the medical record did not contain a smoking assessment.</p> <p>Review of the resident's Physician Order Sheet (POS), dated 10/13/25, showed:</p> <ul style="list-style-type: none"> -Diagnosis of memory loss; -An order for oxygen 2 liters as needed; -Did not contain an approval order for smoking. <p>Review of the resident's nurses notes dated showed:</p> <ul style="list-style-type: none"> -On 05/22/25 the resident smoked in his/her bathroom and ashes found in the residents sink; -On 07/20/25 the resident was caught smoking in his/her recliner at noon and he/she was asked to go outside to smoke; -On 09/10/25 the resident was caught smoking in his/her room. Staff reminded him/her it was not safe or a smart thing to do; -On 09/11/25 the resident was in his/her room smoking again and staff kindly told him/her that it was not allowed and he/she needed to stay outside. <p>Observation on 10/31/25 at 9:46 A.M., showed the residents room with a smell of cigarette smoke and a pack of cigarettes on the residents table. Observation showed an oxygen</p>	A4776		
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A4776	<p>Continued From page 4</p> <p>concentrator not on and not in use by the residents bed and showed a portable oxygen tank in the corner of the residents room not on and not in use.</p> <p>Observation on 10/31/25 at 11:15 A.M., showed the resident's door had a sign that said "Danger oxygen in use. No smoking or open flames."</p> <p>Observation on 10/31/25 at 11:25 A.M., showed the CMA A entered the resident's room to give him/her medications, when the resident was observed in his/her recliner with a lit cigarette in his/her hand. Observation showed there was an oxygen concentrator and an empty portable oxygen cylinder in the resident's room.</p> <p>Observation on 10/31/24 at 11:30 A.M., showed signs hung on the resident's closet door, refrigerator, back patio door, and bathroom door that read "No smoking. Must be 50 feet from building."</p> <p>During an interview on 10/31/25 at 11:27 A.M., CMA A said the resident was caught smoking in his/her room approximately six months ago and the resident is supposed to smoke outside on his/her back patio.</p> <p>During an interview on 10/31/25 at 1:22 P.M., CMA B said the resident usually smokes on his/her back patio and was not sure if the resident smoking in his/her room has been an issue or not. CMA B said the resident will wet his/her cigarette butt and throw it away in the trash after smoking. He/She said the resident is often confused.</p> <p>During an interview on 10/31/25 at 1:41 P.M., the</p>	A4776		
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A4776	Continued From page 5 Executive Director said the resident has not been assessed for smoking and did not realize the facility's smoking policy required residents to be assessed for smoking. He/She said the resident has had a couple prior incidents of smoking in his/her bedroom and said after the incidents, the resident was reminded not to smoke in his/her bedroom. The Executive Director said he/she would expect the resident to not smoke in his/her room and to smoke on his/her back patio. He/She said the resident is expected to wet his/her cigarette butt and throw them in the trash. He/She said the resident gets confused at times and just depends on the day.	A4776	

PLAN OF CORRECTION

Provider/Supplier Name:	Lake George Assisted Living
Street Address, City, Zip:	5000 E Richland, Rd, Columbia, MO 65201
Date of Survey:	10/31/2025

PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER

ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION: (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	COMPLETION DATE
	<p>This plan of correction (POC) is submitted as required under State and Federal law. This submission of POC does not constitute an admission on the part of Lake George Senior Living (the facility), as to the accuracy of the surveyor findings, nor the conclusion drawn therefrom. The facility's submission of the POC does not constitute an admission on the part of the facility that the findings cited are accurate, or that the scope and severity regarding their deficiencies cited are correctly applied. The POC is intended to constitute the facility's credible letter alleging compliance.</p>	
A2283	<p>The facility has established a designated smoking area. The designated smoking area contains a non-combustible ash tray and a non-combustible receptacle to dispose of cigarette butts.</p> <p>The administrator is in-serviced by owner about the designated smoking area requirements.</p> <p>The facility staff are in-serviced by the administrator about the facility's smoking policy and availability of designated smoking area. Staff are also in-serviced on ensuring residents smoke only at designated smoking area. If any residents find smoking in a non-designated staff are instructed to notify administrator immediately.</p> <p>Resident # 1 is educated on smoking at the designated smoking area only.</p> <p>The administrator/ designee will check designated smoking area during the weekly check for 4 weeks to ensure there is a non-combustible ash tray and a non-combustible receptacle available to dispose of cigarette butts. Anything found out of compliance corrected immediately.</p>	12/05/2025
A4776		12/05/2025

