

Missouri Department of Health and Senior Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 17732	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/09/2025
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NAME OF PROVIDER OR SUPPLIER BRADFORD COURT-ASSISTED LIVING BY AMI	STREET ADDRESS, CITY, STATE, ZIP CODE 902 NORTH MAIN NIXA, MO 65714
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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
A4714	<p>19 CSR 30-86.047(13)(B) EDL Inquiry</p> <p>Prior to allowing any person who has been hired in a full-time, part-time, or temporary position to have contact with any resident, the facility shall, or in the case of temporary employees hired through or contracted from an employment agency, the employment agency shall, prior to sending a temporary employee to a facility:</p> <p>(B) Make an inquiry to the department, as provided in section 660.315, RSMo, as to whether the person is listed on the EDL. Each facility shall maintain documents verifying that the EDL checks were requested, the date of each such request, and the nature of the response received for each such request. The inquiry may be made through the department ' s website; II/III</p> <p>This regulation is not met as evidenced by: Class II*</p> <p>Based on interview and record review, facility staff failed to document a check of the employee disqualification list (EDL - a list of individuals unable to work in long-term care settings) for three staff members (Personal Care Aide (PCA) A, PCA B, and Dietary C) of three sampled newly hired staff members prior to the staff member beginning employment with resident contact. The facility census was 29.</p> <p>Review of the facility policy titled "Employee Disqualification List/Abuse Registry," dated 05/10, showed the following: -All employees are expected to not have been placed on the Employee Disqualification List by Missouri Department of Health and Senior Services; -Go online to www.dhss.mo.gov/EDL/ and follow prompts to obtain verification that the employee is</p>	A4714		

Missouri Department of Health and Senior Services
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Christina Bloomer

TITLE

LNHA

(X8) DATE

4/16/25

Missouri Department of Health and Senior Services

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A4714	<p>Continued From page 1</p> <p>clear on the EDL list; -Once verification is obtained, print and place in the yellow employee file if hired; -Check the Employee Disqualification list on a quarterly basis to ensure no current employees have been added to the list.</p> <p>1. Review of PCA A's personnel record showed the following: -Hire date of 01/03/25 with a start date of 01/13/25; -The file did not contain an EDL check before the start date; -Staff documented an EDL check completed on 04/09/25.</p> <p>2. Review of PCA B's personnel record showed the following: -Hire date of 02/13/25 with a start date of 02/17/25; -The file did not contain an EDL check before the start date; -Staff documented an EDL check completed on 04/09/25.</p> <p>3. Review of Dietary C's personnel record showed the following: -Hire date of 02/26/25 with a start date of 03/01/25; -The file did not contain an EDL check before the start date; -Staff documented an EDL check completed on 04/09/25.</p> <p>4. During an interview on 04/09/25, at 3:15 P.M., the Administrator said the following: -It is the Administrator's responsibility to complete EDL checks; -He/She could not find the EDL checks for PCA A, PCA B, and Dietary C</p>	A4714		

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A4714	Continued From page 2 *The higher class merited due to the extent of the violation.	A4714		

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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.