Missouri Department of Health and Senior Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	19668C	A. BUILDING: _____ B. WING _____	C 01/22/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JOY ASSISTED LIVING FOR SENIORS	2030 WEST MT VERNON SPRINGFIELD, MO 65802

(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
A4777	19 CSR 30-86.047(36) Proper Care Per Individual Service Plan Residents shall receive proper care as defined in the individualized service plan. I/II This regulation is not met as evidenced by: Class II Based on interview and record review, the facility failed to ensure all residents received proper care when one resident's (Resident #1) outpatient shoulder surgery could not be scheduled/completed due to open areas on his/her skin from bed bug bites received at the facility. The facility census was 45. 1. Review of Resident #1's face sheet (basic information sheet) showed the following: -Admission date of 07/05/17; -Diagnoses included chronic kidney disease (long-term, progressive loss of kidney function, where kidneys cannot adequately filter waste and excess fluid from the blood), high blood pressure, and anxiety. Review of the resident's individualized service plan (ISP - a planning document prepared by an assisted living facility which outlines a residents needs and preferences, services to be provided, and the goals expected by the resident or the residents legal representative in partnership with the facility), dated 07/05/25, showed the following: -Alert and oriented; -Followed instructions; -Can wait unaccompanied at medical appointments; -Wants to "get stronger." During an interview on 01/22/26, at 1:53 P.M., the resident said the following:	A4777		

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A4777	Continued From page 1 -He/She has had bed bugs in his/her room and has been bit; -There are still some bed bugs in his/her room; -He/She was supposed to have shoulder replacement surgery on 12/15/25, but the surgery was canceled as he/she had too many bug bites; -The facility has had the bed bugs for a long time; -The surgery has not been rescheduled; -He/She has some on and off pain in the shoulder and takes Tylenol as needed for the pain; -He/She would like to get this surgery done soon. Review of the resident's nurses' notes, dated 08/01/25 to 01/01/26, staff did not document related to outpatient shoulder surgery. During an interview on 01/22/26, at 10:50 A.M., Level One Medication Aide (LIMA) A said the following: -The resident was scheduled for shoulder replacement surgery about a month ago, he/she could not remember the exact day; -The resident did not have the surgery as the physician said he/she had open wounds on his/her shoulder; -The resident appeared to have bed bug bites on his/her shoulder and had been itching, they were not open wounds; -The resident was given hydrocortisone (a topical used to temporarily relieve itching, redness, inflammation, and discomfort) cream for the itching; -The surgery had not been rescheduled at this time. During an interview on 01/22/26, at 3:22 P.M., the Administrator said the following: -He/She was aware that the resident's surgery had been canceled due to bed bug bites; -He/She was not aware if the surgery had been	A4777		

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A4777	Continued From page 2 rescheduled; -It was his/her responsibility to ensure that residents' care was not interrupted due to pest control issues. MO00259779	A4777		
A6012	19 CSR 30-87.020(12) Floor Surfaces All floors in the facility shall be clean and shall be maintained in good repair. Floors and floor coverings of all food-preparation, food-storage and utensil-washing areas, and the floors of all walk-in refrigerating units, dressing rooms, locker rooms, toilet rooms and vestibules shall be constructed of smooth durable material such as sealed concrete, terrazzo, ceramic tile, durable grades of linoleum or plastic, or tight wood impregnated with plastic. Nothing in this section shall prohibit the use of antislip floor covering in areas where necessary for safety reasons. III This regulation is not met as evidenced by: Based on observation, interview, and record review, the facility staff failed to ensure all floors were clean when floors in the dining and kitchen areas had sticky black substances present. The facility census was 45. Review showed the facility did not provide a policy regarding floor maintenance. 1. Observations on 01/22/26 showed the following: -At 10:49 A.M., the flooring in the kitchen had sticky black splotchy areas throughout; -At 11:20 A.M., the flooring (tile) near the "self-serve" drink area was covered in sticky black colored spots in several places;	A6012		

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A6012	Continued From page 3 -At 11:30 A.M., the dining area surrounding the kitchen was covered with debris and sticky black splotchy areas. During an interview on 01/21/26, at 2:40 P.M., the Floor Aide/Housekeeper C said the following: -He/She did not have a designated list of items to clean daily; -The kitchen area is cleaned daily by shift and the cook working the shift is responsible. During an interview on 01/22/26, at 11:40 A.M., Cook E said the following: -The overnight shift (11:00 P.M. to 7:00 A.M.) was supposed to do the cleaning; -He/She knew it was dirty, and others don't do the cleaning like they should. He/she did not have time to get a lot of it done with rest of his/her responsibilities on first shift (07:00 A.M. to 3:00 P.M.).	A6012		
A6031	19 CSR 30-87.020(31) Kitchen Waste Containers Covered Waste containers used in food-preparation and utensil-washing areas shall be kept covered when not in actual use. III This regulation is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure that three waste containers in food-preparation and dish-washing areas were kept covered when not in use. The facility census was 45. Review showed the facility did not provide a policy regarding waste containers in the kitchen. 1. Observation on 01/22/26, at 10:37 A.M., of the	A6031		

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A6031	Continued From page 4 food-preparation and utensil-washing areas of the facility kitchen showed the following: -Three large round shaped trash cans. One located by the back of kitchen near prep area behind stove, one located by the ice machine near left entrance into the kitchen, and one located near the dish washing area; -All three trash cans were lined with removable bags; -The trash cans contained food waste and other trash; -The cans were not being actively used; -There were no lids visible to cover the three kitchen trash cans. During an interview on 01/22/26, at 11:43 A.M., the Cook E said the following: -He/She was using the trash cans to prepare lunch (lunch was already made and in the warming station); -He/She was not aware they had to be covered when not in use.	A6031		
A6039	19 CSR 30-87.020(39) Inspect/Rodent Control Effective measures intended to minimize the presence of rodents, flies, cockroaches and other insects on the premises shall be utilized. The premises shall be kept in such condition as to prevent the harborage or feeding of insects or rodents. II/III This regulation is not met as evidenced by: Class II* Based on observation, interview, and record review, the facility failed to maintain an effective pest control system when the facility had ongoing issues with bed bugs in the facility, including the	A6039		

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A6039	Continued From page 5 rooms of six sampled residents' room (Resident #1, #2, #3, #4, #5, and #6) and in the kitchen. The facility census was 45. Review of the facility policy titled "Admission Belongings," undated, showed the following: -Upon admission, all belongings will be inspected in an effort to keep bed bugs from entering the building; -Any items that can be will be put through the dryer for 90 minutes; -Any other items that show signs of possible bed bugs will be put through the hot box; -If an item can't be safely hot boxed, the item will be thoroughly wiped down with alcohol and cleaned. 1. Review of the facility provided documentation of service for treatment of bed bugs and general pest control showed the following: -On 08/14/25, completed K9 (trained dogs, such as beagles or retrievers, to sniff out live bugs and eggs with high accuracy) inspection of the office, activity room, common areas, and resident rooms in the 100 and 300 hallways. Live activity was found in the med room and 21 resident rooms on the 100 hall and seven resident rooms on the 300 hall. No chemicals applied during this service; -On 08/25/25, 30 resident rooms on hall 100 were chemically treated for bed bugs; -On 08/26/25, the entry points, hallways, baseboards, dining rooms, recliners, chair, and couch were chemically treated for bed bugs; -On 08/27/25, two resident rooms on hall 100 were chemically treated for bed bugs and all of the units on 100 hall were steamed and vacuumed; -On 08/29/25, five resident rooms on hall 100 were chemically treated for bed bugs; -On 09/02/25, seven resident rooms on hall 200	A6039		

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A6039	Continued From page 6 were chemically treated for bed bugs; -On 09/03/25, regular pest control service was performed; -On 09/04/25, second bed bug treatment completed on hall 200. Baseboards, ceiling seams, box springs, mattresses, and bed frames were steamed, vacuumed, and liquid treated; -On 09/05/25, third bed bug treatment completed on hall 200. All furniture, ceiling seam, box springs, mattresses and bed frames were vacuumed, steamed and chemically treated; -On 09/08/25, first bedbug treatment on hall 300 completed. Steamed, vacuumed, and chemically treated all furniture, mattresses, box springs, and bed frames. One room on hall 100 was chemically treated; On 09/10/25, second bed bug treatment in hall 300 completed. All baseboards, bed frames mattresses, box springs, and furniture were chemically treated and steamed; -On 09/11/25, regular pest control service was performed; -On 09/12/25, third bed bug treatment on hall 300. Furniture, mattresses, box springs, and bed frames were chemically treated and steamed; -On 09/18/25, two resident rooms on hall 200 were chemically treated for bed bugs. All entry points, hallways, baseboards, dining areas, restrooms, main office and nurse's station were chemically treated for occasional pest invaders; -On 09/22/25, five resident rooms on hall 100 and six resident rooms on hall 200 were chemically treated for bed bugs; -On 10/01/25, one resident room in hall 100, one resident room in hall 200, and two resident rooms in hall 300 were chemically treated for bed bugs; -On 10/06/25, regular pest control services performed. Entry points, hallways, baseboards, dining rooms, kitchen, offices, laundry room, maintenance room, and nurse's station all	A6039		

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A6039	Continued From page 7 chemically treated for occasional pest invaders; -On 10/13/25, regular pest control services completed. Entry points, hallways, baseboards, dining rooms, hair salon, laundry room, maintenance room, tables, chairs, restroom, and kitchen chemically treated for occasional pest invaders; On 10/20/25, eight resident rooms on hall 100, and four resident rooms on hall 300 were chemically treated for bed bugs; -On 10/22/25, eight resident rooms on hall 100 and four resident rooms on hall 300 were chemically treated for be bugs; -On 10/24/25, four resident rooms on hall 300 were chemically treated for bed bugs; -On 10/27/25, regular pest control services completed. Roaches found in exterior bait station. Entry points, hallways, baseboards, dining room, storage rooms, kitchen, nurse's station, laundry room, maintenance room, janitor closet and hair salon chemically treated for occasional pest invaders. Eight rooms on hall 200 chemically treated for bed bugs; -On 10/29/25, follow up for the eight rooms on hall 200 completed. Beds with bed bug activity were steamed and vacuumed; -On 10/31/25, continued follow up for the eight rooms on hall 200 completed. Rooms with activity were chemically treated; -On 11/03/25, regular pest control services completed. Entry points, hallways, baseboards, dining rooms, storage rooms, kitchen, nurse's station, laundry room, maintenance room, janitor closet, hair salon, tables, and chairs were chemically treated for occasional pest invaders. One resident room on hall 100 and one resident room on hall 300 were chemically treated for bed bugs; -On 11/10/25, regular pest control services completed. Entry points, hallways, baseboards,	A6039		

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A6039	Continued From page 8 dining rooms, restrooms, kitchen, nurses' station, laundry room, maintenance room, janitor closet, and hair salon chemically treated for occasional pest invaders; -On 11/12/25, four resident rooms on hall 200 and two resident rooms on hall 300 were chemically treated for bed bugs; -On 11/14/25, follow up for treatment on 11/12/25; -On 11/17/25, hall 100 (number of rooms not stated) chemically treated for bed bugs. Hall 200 and Hall 300 baseboards were chemically treated for bed bugs; -On 11/19/25, two resident rooms on hall 200 were chemically treated for bed bugs; -On 11/21/25, six resident rooms on hall 100 were chemically treated for bed bugs; -On 11/24/25, regular pest control services completed. Entry points, hallways, baseboards, dining rooms, kitchen, restrooms, and common areas were chemically treated for occasional pest invaders; -On 12/01/25, regular pest control services completed. All common areas, entry points, and all of hall 100 chemically treated for bed bugs and roaches. Outside around the windows and doors were also chemically treated; -On 12/17/25, six resident rooms on hall 100, six resident rooms on hall 200, and one resident room on hall 300 were chemically treated for bed bugs; -On 12/19/25, the same resident rooms treated on 12/17/25 were chemically treated again for bed bugs; -On 12/22/25, the same resident rooms treated on 12/17/25 and 12/19/25 were chemically treated again for bed bugs; -On 12/23/25, all common areas, including the dining areas, tables, chairs, as well as the front sitting area and the hair salon were steamed and chemically treated for bed bugs;	A6039		

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A6039	Continued From page 9 -On 12/26/25, tables and chairs in the dining areas and the front sitting area furniture were steamed; -On 01/05/26, regular pest control services completed. Three resident rooms on hall 100 were chemically treated for bed bugs; -On 01/12/26, six resident rooms on hall 100 were chemically treated for bed bugs; -On 01/19/26, regular pest control services completed. The common areas, hallways, kitchen, and other accessible areas were chemically treated for bed bugs and other invaders. Wall plates of receptacles and switches were dusted for bed bugs. Baseboards were also dusted. Mattresses and box springs were steamed. Strips were also placed in the drop ceiling to control bed bugs; -On 01/20/26, chairs and tables were chemically treated for bed bugs. A total of 15 live bed bugs were found on three pieces of furniture. All live bed bugs were steam treated. All pieces of furniture were chemically treated for bed bugs; -On 01/21/26, all rooms were vacuumed for removal of bed bugs and bed bug eggs, followed by a steam treatment. All rooms were chemically treated for bed bugs; -On 01/22/26, the furniture in the common areas was chemically treated for bed bugs. The baseboards in all common areas and around the doors, windows, and outlets were chemically treated for bed bugs. During an interview on 01/27/26, at 2:06 P.M., the manager of the pest control company said the following -He/She began a contract with the facility in August of 2025; -They were treating as aggressive as possible. They treated 100 hall on Monday, 200 hall on Wednesday, 300 hall on Friday, and the main	A6039		

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A6039	Continued From page 10 common areas on Tuesdays and Fridays; -They were contracted once per week but have amped up due to recent outbreak again. 3. During an interview on 01/22/26, at 1:53 P.M., Resident #1 said the following: -He/She has had bed bugs in his/her room and had been bit; -There were still some bed bugs in his/her room; -The facility has had the bed bugs for a long time; -There was a company that came to spray for the bed bugs every two to three weeks. 4. During an interview on 01/21/26, at 11:24 A.M., Resident #2 said the following: -He/She has lived in the facility about a year and there have always been bed bugs in the facility; -He/She had bites on his/her hand last week; -His/her family won't visit him/her in the facility because of the bed bugs. 5. During an interview on 01/21/26, at 11:30 A.M., Resident #3 said the following: -He/She had lived in the facility over a year and there had always been bed bugs in the facility; -The facility did not check his/her belongings for bed bugs when he/she was admitted. 6. During an interview on 01/21/26, at 1:05 P.M., Resident #4 said the following: -There were still bed bugs in his/her room; -The pest control people are in the facility a lot. Observation of the resident's room on 01/21/26, at 1:05 P.M., showed three live bed bugs were observed on the wall across from the resident's bed. 7. During an interview on 01/21/26, at 1:15 P.M. Resident #5 said the following:	A6039		

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A6039	Continued From page 11 -If he/she had a bug on their body, they just use a lint roller to get it off; -If he/she had bugs in their bed, he/she just covered them up with a sheet or blanket; -The facility takes their clothes and other belongings to treat for bed bugs and they live out of bags; -His/her family will only visit him/her in the front foyer due to the bed bugs. 8. During an interview on 01/21/26, at 2:45 P.M. Resident #6 said the following: -He/She had bed bugs in his/her room and had been bitten in the past; -His/Her hall had been sprayed three times in the six months he/she has lived in the facility; Observation of the resident's room on 01/21/26, at 2:45 P.M., showed a live bed bug observed on the wall to the right of the resident's bed. The resident killed the bed bug. 9. During an interview on 01/21/26, at 2:15 P.M. Level One Medication Aide (LIMA) A said the following: -There had been a bed bug infestation in the facility for about eight months; -Pest control services have been coming out since June 2025; -New residents now have their clothes put in the dryer on high heat for 90 minutes when they enter the facility, this is a newer requirement; -He/She sprays himself/herself down with alcohol when leaving the facility after a shift. During an interview on 01/21/26, at 2:27 P.M. LIMA B said the following: -He/She had been with the facility for three years and there has been a bed bug infestation the entire three years;	A6039		

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A6039	Continued From page 12 -Residents have been bitten and he/she treated the bites with physician ordered creams; -A new pest control company started a few months ago and the situation has improved; -He/She knew of no new policies to prevent bed bugs from coming into the facility; -He/She knew of at least one resident whose family will not visit the facility due to the bed bugs; -He/She feels sad for the residents. During an interview on 01/21/26, at 2:40 P.M., Floor Aide C said the following: -The facility has had bed bugs for a few years; -The bed bug situation has improved since the new pest control company started a few months ago; -He/She knew of no new policies to prevent bed bugs from coming into the facility; -Residents share things and this is how the bed bugs spread from hall to hall; -He/She tried to change linens weekly and has had to throw out a lot of bedding; -The infestation was worse on hall 100 and hall 200. During an interview on 01/26/26, at 3:08 P.M., LIMA D said the following: -Bed bugs were mainly on hall 100 and hall 200; -The new pest control company was doing a better job than the last one; -He/She knew of at least two residents whose family members refused to visit the facility because of the bed bugs; -He/She knew of residents that had bites because of the bed bugs; -He/She knew of no new policies to prevent bed bugs from coming into the facility; -He/She sprayed himself/herself with alcohol when their shift had ended.	A6039		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	19668C	A. BUILDING: _____ B. WING _____	C 01/22/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JOY ASSISTED LIVING FOR SENIORS	2030 WEST MT VERNON SPRINGFIELD, MO 65802

(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
A6039	Continued From page 13 During interviews on 01/21/26, at 11:45 A.M., and on 01/22/26, at 3:22 P.M., the Administrator said the following: -He/She hired a new pest control company in August 2025; -The facility is treated at least three times a week in rotating halls, and in all the common areas; -When a hall was treated, the residents clothes were treated by high heat in the dryer, then regular washing. Other belongings are placed in the "hot box" in the shed; -There was a new policy to treat all belongings when a new resident in moving into the facility; -He/She has not heard complaints from residents' families about the bed bugs and family was allowed in the facility; -He/She was responsible for pest control in the facility. *The higher classification merited due to the extent of the violation, the violation's effect on the residents, and the impact when combined with other deficiencies. MO00258629, MO00258752, MO00259779, MO00259785, MO00259911, MO00260327, MO00260335, MO00260339, MO00260340, MO00260372, and MO00260386	A6039		
A7067	19 CSR 30-87.030(65) Nonfood Contact Surfaces,Cleaned as Needed Nonfood-contact surfaces of equipment shall be cleaned as often as is necessary to keep the equipment free of accumulation of dust, dirt, food particles and other debris. III This regulation is not met as evidenced by: Based on observation and interview, the facility	A7067		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	19668C	A. BUILDING: _____ B. WING _____	C 01/22/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JOY ASSISTED LIVING FOR SENIORS	2030 WEST MT VERNON SPRINGFIELD, MO 65802

(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
A7067	Continued From page 14 failed to ensure all non-food contact surfaces were kept clean when the refrigerators, freezers, ovens, microwave, toaster, dishwasher, cook tops, and ice machine were not kept clean. The facility census was 45. 1. Observations on 01/22/26, at 10:20 A.M., of the kitchen showed the following: -Toaster a build-up of debris present inside and outside of the appliance; -The microwave had a sticky residue on the outside and baked on food particles on the inside; -The ice machine had a fuzzy substance blocking the vent; -The double door freezer and double door refrigerator had sticky smears on outside of the doors. The inside of the had rust and black substance on the shelves; -The gas stove top had caked on remnant of burnt on food; -The ovens were had grease on the outside as well as burnt on food, spillage inside measuring up to an inch thick; -The dishwashing station had dirty rags thrown down on the racks and a sludge like substance brown in color in the main sink area near the faucet; -The warming area had food covered with soiled towels awaiting to be served for lunch; -The self-serve drink area had brown discolored water with a paper cup floating inside under the second ice machine that was cover in sticky substance as well on the shelf; -Eye washing sink area was covered in brown rust like staining in the sink as well as down the pipes and wall behind it. During an interview on 01/22/26, at 11:45 A.M., the Cook E said the following: -He/She said he/she did not have time to do	A7067		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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A7067	Continued From page 15 additional cleaning due to having to cook/serve breakfast and lunch; -The second and third shift were supposed to be deep cleaning. During an interview on 01/22/26, at 3:06 P.M., the Administrator said the following: -He/She expected all non-contact food services to be kept clean; -The employees are supposed to be keeping it clean.	A7067		

PLAN OF CORRECTION

Provider/Supplier Name:	JOY ASSISTED LIVING FOR SENIORS
Street Address, City, Zip:	2030 W MT VERNON ST SPRINGFIELD, 65802
Date of Survey:	1-22-2026

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
A4777	Resident #1 told the Administrator and several staff members that surgery had been cancelled due to bed bug bites. When chart was pulled to respond to this SOD, the administrator found that was not the case. The surgeon postponed the surgery based on resident requiring cardiac clearance. Resident had an ablasion done. April 1, 2026 CMA called resident's orthopedic surgeons' office regarding the left shoulder surgery. She was told at resident's appt on 5-14-26 they will discuss the scheduling of the left shoulder surgery. The above information was not available in the resident chart on the day of this inspection. All residents have been and are still being reminded and asked by staff to report any skin issues, including any bug bites, so they can be addressed. Residents who have assistance with bathing or dressing have their skin assessed by staff for these issues. Staff will continue to monitor skin and during monthly summary, residents will be asked specifically about skin issues so it can be documented. This will start with the April monthly summaries. This will be monitored by the administrative assistant. Treatment to eliminate bugs continues ongoing.	4-15-26
A6012	Each person working in the kitchen is responsible for mopping up spills as they happen and moping the entire floor at the end of the shift. All staff do have lists of what is required of them, as well as being made aware that if an emergency or need arises, they will be expected to assist as needed. We will be reviewing/ re-educating the staff on 4-7-26 regarding the lists of duties, as well as the proper dilution of floor cleaner to insure floors are kept clean. Residents will also be reminded that if they spill something they need to make staff aware so it can be cleaned up. This will be monitored by administrative assistant and D.O.N.	4-7-2026
A6031	Lids or new trash cans will be purchased, and staff will be educated on how to keep them properly covered while not in use. This will be monitored ongoing by Administrative assistant and the D.O.N.	4-7-2026
A6039	As evidenced by the 5 pages in the statement of deficiencies -	4-22-26 and

	reflecting dates and treatments for bed bugs, the facility has been diligently trying to eliminate all bed bugs. Along with the treatments we are following the instructions of the pest control company to do everything we can to help eliminate them. This includes speaking with other pest control companies to learn how they would handle the situation. Based on our findings, we do believe our current pest control company is properly navigating the situation. There is continuing to be a decreasing amount of bug activity, although some are currently present. Recently holes were drilled a foot apart in every resident room so a spray foam chemical could be distributed into the walls. In addition, they continue to inspect all resident rooms and common areas, treating where needed, using the most appropriate methods. The extermination company gives us a list of which rooms will be treated on which day. Those rooms are prepared according to the instructions we're given. Those rooms have all bedding stripped, including pillows and washed per bed bug procedures. In some cases, all resident clothing is also taken and washed per those procedures. Beds are checked daily by facility floor staff while they are making/changing beds. The facility has a bed changing list for days resident beds are stripped and changed each week. The beds are stripped and if needed, the bed bug covers are washed as well as the linens. This is followed in any instance if bugs are found, not just on the day to change sheets. Once a room has been cleared by the professionals, new bed bug covers will be placed on the mattress and box springs as needed. Beds are also changed PRN and the same procedures followed. Staff clean resident rooms daily and are checking for bug activity and reporting any to DON or Administrator. The walls in resident rooms are being cleaned as needed. This is being monitored by the Administrative Assistant and ultimately the Administrator. Regarding the measures being taken upon admission, those were not presented to the staff as a "new policy". The measures were put in place by management, which is who handles them for the most part. We do ask staff to assist with drying the clothing, etc., but have never referred to it as a policy. It was, of course, initiated due to the bed bug situation and staff have been doing that for current residents for a while. This will continue to be monitored by management. Admiistrator will be ultimately responsible.	ongoing
A7067	The kitchen cleaning schedule has been reviewed and updated. Staff are expected to follow it to insure cleanliness. They are also required to sign off on the cleaning tasks they completed during their shift. Staff will be educated through an in-service on 4-7-2026, where the cleaning schedule will be reviewed in detail to make sure they all understand. (sign off sheets are attached) The towels on the steam table were clean but stained. Towels are placed over the steam pan lids to assist in keeping the food as warm as possible. To insure this doesn't happen again, new	4-7-2026

	colored towels are being purchased for this sole purpose. Cook will be responsible to insure only the correct towels are used. This will be monitored ongoing by Administrative assistant and D.O.N. I've spoken with the company who maintains our ice machine to insure they'll be here at regular intervals for cleaning. Kitchen staff are being instructed to alert the administrator if they see something needing attention . Will be monitored by administrator	
*****	All education/reviews/in-services referred to in the POC will be conducted by D.O.N.	

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.