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
	28019	A. BUILDING: _____ B. WING _____	02/13/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MEADOW RIDGE SENIOR LIVING	521 MEADOW RIDGE LANE MOBERLY, MO 65270

(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
A1225	19 CSR 30-86.012(25) Elevator Requirements Residential care facilities and facilities formerly licensed as residential care facilities II whose plans were initially approved between December 31, 1987 and December 31, 1998, shall have at least one (1) hydraulic or electric motor-driven elevator if there are more than twenty (20) residents with bedrooms above the first floor. The elevator installation(s) shall comply with all local and state codes, American Society for Mechanical Engineers (ASME) A17.1, Safety Code for Elevators, Dumbwaiters, and Escalators, and the National Fire Protection Association ' s applicable codes. All facilities with plans approved on or after January 1, 1999, shall comply with all local and state codes, ASME A17.1, 1993 Safety Code for Elevators and Escalators, and the 1996 National Electrical Code. These references are incorporated by reference in this rule and available at: American Society for Mechanical Engineers, Three Park Avenue, New York, NY 10016-5990; and The American National Standards Institute, 11 West 42nd Street, 13th Floor, New York, NY 10036. This rule does not incorporate any additional amendments or additions. II This regulation is not met as evidenced by: Based on record review and interview on 2/13/2025, the facility failed to have a current approved elevator inspection certification from either the city or the state available. The facility census was thirty-seven (37). This affected thirty-seven (37) of thirty-seven (37) residents. Record review showed the current posted state elevator inspection certificates for the elevator expiring on 8/6/2024 During an interview on 2/13/2025 at 3:00 P.M., the administrator stated she just needed to pay	A1225		

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A1225	Continued From page 1 for the permit and would get that donequickly	A1225		
A2286	19 CSR 30-86.022(15)(A) Wastebaskets, Metal/UL/FM-Requirements Trash and Rubbish Disposal. (A) Only metal or UL- or FM-fire-resistant rated wastebaskets shall be used for trash. II This regulation is not met as evidenced by: Class II Based on observation and interview on 2/13/2025 the facility failed to use only metal or UL- or FM-fire-resistant rated wastebaskets. The facility census was thirty-seven (37). This affected thirty-seven (37) of thirty-seven (37) residents. Observations showed resident rooms 108, 201, 203,204, 206, and 209 with unapproved plastic trash cans. During an interview on 2/13/2025 at 12:00 PM., the maintenance director said he would get the trash cans replaced with correct ones.	A2286		
A2298	19 CSR 30-86.022(17) Oxygen Storage Requirements Oxygen storage shall be in accordance with NFPA 99, 1999 Edition. II/III This regulation is not met as evidenced by: Class III. Based on observation and interview on	A2298		

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A2298	Continued From page 2 2/13/2025, facility fails to ensure oxygen storage shall be in accordance with NFPA 99, 1999 edition. The facility census is thirty-seven (37). This deficiency affects thirty-seven (37) of thirty-seven (37) residents. Observations showed resident rooms 126,135,136,and 211 without proper signage. In an interview with the maintenance director at 12:00 P.M. he stated he would get those signs hung.	A2298		
A3219	19 CSR 30-86.032(18) Extension Cords/Duplex Receptacles If extension cords are used, they must be Underwriters ' Laboratory (UL)-approved or shall comply with other recognized electrical appliance approval standards and sized to carry the current required for the appliance used. Only one (1) appliance shall be connected to one (1) extension cord and only two (2) appliances may be served by one (1) duplex receptacle. If extension cords are used, they shall not be placed under rugs, through doorways or located where they are subject to physical damage. II/III This regulation is not met as evidenced by: Class III Based on observation and interview on 2/13/2025, the facility failed to insure that extension cords comply with electrical appliance approved standards. The facility census was thirty-seven (37). This deficiency potentially affected thirty-seven (37) of thirty-seven (37) residents.	A3219		

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A3219	Continued From page 3 Observations showed resident rooms 108 and 204 with multi plug electrical adapters During the exit interview on 2/13/2025 at 12:00 P.M., the maintenance director stated he would get those removed.	A3219		

PLAN OF CORRECTION

Provider/Supplier Name:	Meadow Ridge Senior Living
Street Address, City, Zip:	521 Meadow Ridge Lane
Date of Survey:	02/13/2025

PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER	26D2091603

ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION: (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	COMPLETION DATE
A1225	Elevator inspection had been completed but we had not received our invoice for the operating certificate. I contacted the Div. of Fire Safety and our invoice had been emailed to the address of a previous employ. I verified our correct contact information with them and obtained the invoice for our operating certificate and made the payment. We received our operating certificate on 02/20/2025. Going forward if we do not receive our invoice in a timely manner we will reach	02/20/25
A2286	All unapproved items (plastic wastebaskets) have been removed from apartments 108, 201, 203, 204, 206 and 209. The maintenance director will continue with his regular apartment checks to ensure that all wastebaskets are metal or UL or FM fire-resistant rated. We also had a meeting and educated staff to report any items that are not in compliance, so that they can be removed and replaced with ones that are appropriate. Residents and families will also be educated upon move in regarding appropriate receptacles.	02/14/25
A2298	Appropriate signage for oxygen use is now posted on the doors of apartments 126,135, 136 and 211. All nursing staff have been educated on the need to properly display signs for oxygen storage. Administrator will be directly responsible for making sure signs are posted on apartments with oxygen stored and/or in use.	02/14/25
A3219 (cont. on p.2)	All unapproved multiplug adapters have been removed from apartments 108 and 204. Maintenance director will continue doing his regularly scheduled apartment checks to ensure that no inappropriate devices are in use. Staff have	02/14/25

	also been educated as to what items are not appropriate and told to report them immediately so that they can be removed and replaced with ones that are in compliance. Residents and families will also be educated upon move in regarding appropriate receptacles.	

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.