STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	29711	A. BUILDING: _____ B. WING _____	02/18/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAK RIDGE ASSISTED LIVING	403 CRISPIN STREET RICHMOND, MO 64085

(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
A4711	19 CSR 30-86.047(13)(A) Criminal Background Check Requirements 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: (A) Request a criminal background check for the person, as provided in section 660.317, RSMo. Each facility shall maintain documents verifying that the background checks were requested, the date of each such request, and the nature of the response received for each such request. II This regulation is not met as evidenced by: Class II Based on interview and record review, the facility failed to request a criminal background check (CBC) and document with the date of such request, prior to allowing three of five sampled employees (Nursing Staff A, Housekeeping Staff A, and Dietary Staff A) to have contact with residents. The facility census was 41. The facility did not provide a policy regarding CBC's. 1. Review of Nursing Staff A's personnel record showed: -A hire date of 11/13/2025; -His/Her first date of contact with residents indicated by his/her first clock in, was on 11/18/2025; -A CBC was not requested until 02/16/2026. 2. Review of Dietary Staff A's personnel record	A4711		

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A4711	19 CSR 30-86.047(13)(A) Criminal Background Check Requirements 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: (A) Request a criminal background check for the person, as provided in section 660.317, RSMo. Each facility shall maintain documents verifying that the background checks were requested, the date of each such request, and the nature of the response received for each such request. II This regulation is not met as evidenced by: Class II Based on interview and record review, the facility failed to request a criminal background check (CBC) and document with the date of such request, prior to allowing three of five sampled employees (Nursing Staff A, Housekeeping Staff A, and Dietary Staff A) to have contact with residents. The facility census was 41. The facility did not provide a policy regarding CBC's. 1. Review of Nursing Staff A's personnel record showed: -A hire date of 11/13/2025; -His/Her first date of contact with residents indicated by his/her first clock in, was on 11/18/2025; -A CBC was not requested until 02/16/2026. 2. Review of Dietary Staff A's personnel record	A4711		

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OAK RIDGE ASSISTED LIVING	403 CRISPIN STREET RICHMOND, MO 64085

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A4711	Continued From page 1 showed: -A hire date of 09/27/2025; -His/Her first date of contact with residents indicated by his/her first clock in, was on 10/02/2025; -A CBC was not requested until 02/16/2026. 3. Review of Housekeeping Staff A's personnel record showed: -A hire date of 07/18/2025; -His/Her first date of contact with residents indicated by his/her first clock in, was on 07/20/2025; -A CBC was not requested until 07/29/25, after the employee had already begun having contact with residents. During an interview on 02/18/2025, at 1:20 P.M., the Administrator said: -The Business Office Manager were in charge of completing CBC checks on employees at the time of hire; -She expected all staff to have a CBC completed and in their file prior to or within 3 days of the first day of employment.	A4711		
A4714	19 CSR 30-86.047(13)(B) EDL Inquiry 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: (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	A4714		

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A4714	Continued From page 2 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 This regulation is not met as evidenced by: Class II* Based on interview and record review, the facility failed to make an inquiry to the department whether a person was listed on the Employee Disqualification List (EDL) and document such requests, prior to allowing three of five sampled employees (Nursing Staff A, Housekeeping Staff A, and Dietary Staff A) to have contact with residents. The facility census was 41. The facility did not provide a policy regarding EDL checks. 1. Review of Nursing Staff A's personnel record showed: -A hire date of 11/13/2025; -His/Her first date of contact with residents indicated by his/her first clock in, was on 11/18/2025; -An EDL check was not requested until 02/16/2026. 2. Review of Dietary Staff A's personnel record showed: -A hire date of 09/27/2025; -His/Her first date of contact with residents indicated by his/her first clock in, was on 10/02/2025; -An EDL check was not requested until 02/16/2026. 3. Review of Housekeeping Staff A's personnel	A4714		

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A4714	Continued From page 3 record showed: -A hire date of 07/18/2025; -His/Her first date of contact with residents indicated by his/her first clock in, was on 07/20/2025; -An EDL check was not requested until 07/29/25, after the employee had already begun having contact with residents. During an interview on 02/18/2026, at 1:20 P.M., the Administrator said: - Business Office Manager was in charge of completing EDL checks on employees at the time of hire; -She expected all staff to have an EDL check completed and in their file prior to or within 3 days of the first day of employment. * The higher classification merited due to the extent of the violation.	A4714		

PLAN OF CORRECTION

Provider/Supplier Name:	Oak Ridge Assisted Living & Memory Care
Street Address, City, Zip:	403 Crispin St. Richmond, MO 64085
Date of Survey:	February 18th,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
A4711	Criminal Background Check Requirements: Background and EDL must be ran within 2 days of hiring the new employee.	03/06/26
	On February 16, 2026, the Executive Director conducted a comprehensive audit of all employee personnel records after BOM no showed. During this audit, errors were identified related to documentation of Criminal Background Checks (CBC) and Family Care Safety Registry (FCSR) verification. At the time of the audit, this community did not have direct access to run CBC/FCSR reports. Per company procedure, these reports were requested through the corporate office at Shirkey's Nursing and Rehabilitation Payroll Department. It was identified that this process was not consistently completed or documented in the personnel files. Corrective Action for Affected Employees: All current employee background checks were immediately reviewed and verified. All employees were confirmed to have completed background screenings and were found to be free of disqualifying criminal records. All personnel files were corrected and updated to include the required documentation as of March 6, 2026. No residents or staff were placed at risk. Systemic Changes to Prevent Recurrence: To ensure compliance moving forward, the following processes have been implemented: • A New Hire Personnel File Checklist was created and implemented to ensure all required documentation, including CBC, FCSR, EDL, and E-Verify verification, is completed and documented prior to orientation or working on the floor. The checklist has been reviewed with the Business Office Manager (BOM) and implemented	

	immediately. • A new company policy was implemented on March 4, 2026, stating that all employee orientations will occur on Wednesdays only. This policy ensures there are at least two days between hiring and the employee start date, allowing adequate time for background checks and all required documentation to be completed and verified. • When a hiring manager completes an interview and selects a candidate for hire, the completed application and new hire information will be provided to the Business Office Manager (BOM). The BOM will determine the next available Wednesday orientation date and notify the hiring manager. The hiring manager will then schedule orientation and the employee's first shifts. • The BOM will complete the New Hire Checklist and submit it to the Executive Director (ED) for review prior to orientation. Monitoring: The Executive Director will review all new employee personnel files each Tuesday prior to Wednesday orientation to ensure CBC, FCSR, EDL, and E-Verify documentation are present and accurate. No employee will be allowed to attend orientation until the Executive Director signs off verifying that all required documentation is complete. Additional Corrective Measure: A request has been submitted for this community to obtain direct CBC/FCSR system access to allow background checks to be completed immediately onsite. This request is currently pending. Until system access is granted, all new hire paperwork will continue to be submitted to Shirkey's Nursing and Rehabilitation Payroll Department for background check processing, and employees will not be permitted to begin orientation or work until verification has been received and documented. Completion Date: March 6, 2026	
A4714	On February 16, 2026, the Executive Director conducted a comprehensive audit of all employee personnel records. During this audit, documentation errors were identified related to Employee Disqualification List (EDL) inquiries within several personnel files.	

	The review determined that EDL inquiries had not been consistently documented in employee files at the time of hire. All current employees were immediately reviewed to verify they were not listed on the Missouri Employee Disqualification List. Corrective Action for Affected Employees: All employee EDL inquiries were immediately completed or verified and documentation was placed in the personnel files. All employees were confirmed not to be listed on the Employee Disqualification List, and all personnel files were corrected and brought into compliance as of March 6, 2026. No residents or staff were placed at risk. Systemic Changes to Prevent Recurrence: • A New Hire Personnel File Checklist has been created and implemented to ensure all required documentation, including EDL inquiry verification, CBC/FCSR, and E-Verify, are completed prior to orientation or the employee working on the floor. The checklist has been reviewed with the Business Office Manager (BOM) and implemented immediately. • A new company policy was implemented on March 4, 2026, stating that all employee orientations will occur on Wednesdays only. This ensures there are at least two days between hiring and orientation, allowing sufficient time for required background checks and EDL verification. • When a hiring manager selects a candidate for hire, the completed application and new hire information will be provided to the Business Office Manager (BOM). The BOM will determine the next available Wednesday orientation date and notify the hiring manager. The hiring manager will then schedule the employee for orientation and their first scheduled shifts. • The BOM will complete the New Hire Personnel Checklist, ensuring EDL inquiry documentation is present, and submit the file to the Executive Director (ED) for review prior to orientation. Monitoring: The Executive Director will review all new employee personnel files each Tuesday prior to Wednesday orientation to verify that all required documentation, including EDL inquiry verification, CBC/FCSR documentation, and E-Verify confirmation, are present and accurate. No employee will be allowed to attend	

	orientation until the Executive Director signs off verifying that all required documentation is complete. Completion Date: March 6, 2026	

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.