

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  265367	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  09/18/2025
NAME OF PROVIDER OR SUPPLIER  Cypress Point-Skilled Nursing by Americare		STREET ADDRESS, CITY, STATE, ZIP CODE  801 Baliff Drive Dexter, MO 63841	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on observation, interview, and record review, the facility failed to provide a safe, clean and comfortable homelike environment. This deficient practice had the potential to affect all residents in the facility. The facility census was 65. The facility did not provide a policy for a homelike environment.1. Observations on 09/15/25 at 9:34 A.M., and 2:20 P.M., 09/16/25 at 2:10 P.M., 09/17/25 at 3:24 P.M., and 09/18/25 at 9:02 A.M., of the kitchen's ice machine area showed: - A strip of baseboard trim unattached from the wall on the bottom right side near the ice machine. 2. Observations on 09/15/25 at 3:11 P.M., 09/16/25 at 2:56 P.M., and 09/17/25 at 3:06 P.M., showed:- Visible cobwebs on a sprinkler head located in the TV room near the nurses station;- Several light fixtures with insects, dirt, and debris around the nurses station;- Cobwebs on a light fixture in front of the therapy room near room [ROOM NUMBER];- Two missing light fixture protective covers near the laundry room and room [ROOM NUMBER];- An eight-foot (ft) area of missing wall trim behind the linen cart area near the nurses station;- Privacy curtains with several stains and dark scuffs in room [ROOM NUMBER], room [ROOM NUMBER], room [ROOM NUMBER] and room [ROOM NUMBER].During an interview on 09/16/25 at 1:57 P.M., the resident in room [ROOM NUMBER] said he/she would like the privacy curtain at the foot of his/her bed replaced because it was dirty. During an interview on 09/16/25 at 2:15 P.M., the resident in room [ROOM NUMBER] said he/she would like the privacy curtain changed because it had two large brown stains on it. He/She lived at the facility for five years and his/her privacy curtains had never been changed.3. Observation on 09/16/25 at 3:09 P.M., of the bath/shower room next to room [ROOM NUMBER] showed:- A plastic container filled with a dark liquid lay on top of the sink;- A plastic container filled with a white liquid and a straw, a disposable razor, a wet washcloth, a black hair pick, and paper lay inside the sink basin;- Dirty gloves lay on the floor by the sink;- A shower chair and a wheelchair sat in front of the sink and toilet;- A trash can with exposed empty boxes, dirty gloves and gowns, and toilet paper with no lid;- A saturated towel and a box of medium gloves lay on the shower room floor;- A yellow tumbler, a plastic container filled with a dark liquid and a straw, a bag of cough drops, and a bag of opened chips lay on top of the shower cart next to the whirlpool;- A strong smell of urine;- The bath/shower room not in use.Review of the Maintenance Repair Log, dated 02/21/25 - 07/21/25, showed:- No areas of concern addressed.During an interview on 09/18/25 at 8:37 A.M., Shower Aide A said the shower room should always be cleaned prior to and after residents' shower had been completed. There should be no foul odors, trash, wet towels, supplies left on the floor, food, beverages, and equipment stored and/or left in the shower room. He/She locked the shower room when finished.During an interview on 09/18/25 at 8:47 A.M., Shower Aide B said the shower room should be cleaned and sanitized after giving resident showers. There should be no foul odors, trash, wet towels, supplies on the floor, food, beverages, and equipment stored and/or left in the shower room. He/She locked the shower when finished.During an interview on 09/18/25 at 10:32 A.M., Housekeeper C said if he/she saw something that needed to be fixed or repaired, he/she verbally told maintenance or would inform the housekeeping supervisor of the needed repair. During an interview on 09/18/25 at 11:37 A.M., the Dietary Manager (DM) said the Maintenance Supervisor (MS) and the Administrator were made aware of the baseboard trim coming off the wall in June 2025.During an interview on 09/18/25 at 1:48 P.M., the MS said light fixtures should have covers, be clean, and free of cobwebs, dirt, and debris on a regular basis. He/She was aware of the baseboard trim needing replaced by the ice machine but not sure how to replace the missing trim behind the linen cart area near the nurse's station. During an interview on 09/18/25 at 2:35 P.M., the Administrator said light fixtures should have covers, be clean and free of cobwebs, dirt, and debris. The wall trim should be repaired when reported in a timely manner. He was aware of the baseboard needing to be replaced by the ice machine. The MS told him verbally what he/she would be doing daily but did not document daily tasks completed. Staff used the showers sometimes during shifts when showers weren't being given but should be clean and tidy.</p>		