

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  265625	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/14/2025
NAME OF PROVIDER OR SUPPLIER  Aspire Senior Living New Florence		STREET ADDRESS, CITY, STATE, ZIP CODE  515 Picnic Street New Florence, MO 63363	

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)
F 0727  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Some	<p>Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.</p> <p>Based on interview and record review, facility staff failed to provide the services of a Registered Nurse (RN) for at least eight consecutive hours per day, seven days a week. The facility census was 46. 1. Review of the facility's Registered Nurse policy, dated 01/30/25, showed except when waived, the facility must use the services of a registered nurse for at least eight consecutive hours a day, seven days a week. 2. Review of the Facility Assessment, revised 05/15/25, showed the facility is to staff at least one RN at least eight hours per day, seven days a week. 3. Review of the facility's RN Staffing assignments, dated 06/01/25 through 06/30/25, showed staff did not provide the services of an RN for eight consecutive hours per day on 06/11/25, 06/13/25, and 06/22/25. 4. Review of the facility's RN Staffing assignments, dated 07/01/25 through 07/14/25, showed staff did not assign an RN to work on 07/04/25, 07/07/25, 07/12/25, and 07/13/25. 5. During an interview on 07/14/25 at 1:12 P.M., the Staffing Coordinator said he/she is aware of the requirement to have an RN in the facility eight consecutive hours daily, but the facility only has one RN on staff other than the Director of Nursing (DON). He/She said the RN was scheduled off on 07/04/25, 07/07/25, 07/12/25, and 07/13/25, he/she reached out to the DON to cover, but the DON was unable to cover the shifts. During an interview on 07/14/25 at 1:43 P.M., the interim DON said he/she is aware of the requirement to have an RN in the facility eight consecutive hours daily, and the DON should ensure the requirement is met. He/She said he/she assumed the interim DON role on 07/14/25 and was not aware the Staffing Coordinator did not assign an RN to work on 07/04/25, 07/07/25, 07/12/25, and 07/13/25. During an interview on 07/14/25 at 1:52 P.M., the administrator said he/she is aware of the requirement to have an RN in the facility eight consecutive hours daily, the Staffing Coordinator is expected to schedule an RN, and the DON should ensure the requirement is met. He/She said he/she just returned from vacation and was not sure why there was not an RN in the building on 07/04/25, 07/07/25, 07/12/25, and 07/13/25. Intake#1775987</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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0732</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Many</p>	<p>Post nurse staffing information every day.</p> <p>Based on observation, interview, and record review, facility staff failed to post the required nurse staffing information to include the facility name, current date, resident census, total number of staff and the actual hours worked by both licensed and unlicensed nursing staff directly responsible for resident care, per shift, daily. Facility staff failed to keep the required daily staffing records. The facility's census was 46.1. Review of the facility's Nurse Staffing Information policy, dated 01/30/25, showed staff are directed as follows:-Post the following information daily: facility name, current date, the total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift: Registered Nurse (RN), Licensed Practical Nurses (LPN) and Certified Nurse Aides (CNA), and the resident census;-Post the nurse staffing data as specified above daily at the beginning of each shift, in a clear and readable format, and in a prominent place readily accessible to residents and visitors;-Maintain the posted daily nurse staffing data for a minimum of 18 months, or as required by State law, whichever is greater. 2. Review of the facility's Nurse Staffing records on 07/14/25, showed the facility did not contain the daily nurse staffing information for:-May 2025;-June 2025;-07/01/25 through 7/14/25. 3. Observation on 07/14/25 at 9:50 A.M., 10:00 A.M., and 12:45 P.M., showed facility staff did not post the required nurse staffing information in the facility. 4. During an interview on 07/14/25 at 12:48 P.M, the interim Director of Nursing (DON) said the staffing coordinator is responsible to post the daily nurse staffing sheet. During an interview on 07/14/25 at 1:12 P.M., the Staffing Coordinator said he/she was not aware it was his/her responsibility to post the daily nurse staffing sheet and was not familiar with all the information required to be posted. During an interview on 07/14/25 at 1:43 P.M., the interim DON said he/she did not know why the nurse staffing sheet was not posted daily. He/She said the required staffing sheets should be retained for 18 months, and he/she was not sure why there was no record since 05/01/25 when the new company took over. During an interview on 07/14/25 at 1:52 P.M., the administrator said the staffing coordinator is responsible to post the nurse staffing sheet daily, and him/her or the DON to ensure it gets done. He/She said he/she had not realized the nurse staffing sheet was not being done daily. He/She said the records should be maintained for 18 months. Intake# 1775987</p>		