

# LTC REGULATION UPDATE

MISSOURI ASSISTED LIVING ASSOCIATION – MAY 2026



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[www.health.mo.gov](http://www.health.mo.gov)

MISSOURI DEPARTMENT OF  
**HEALTH &  
SENIOR SERVICES**

# STATE WORKLOAD

## COMPLAINTS:

- State Fiscal Year 2020: 8,970
- State Fiscal Year 2025: 12,219
- Total # of complaints pending onsite investigation (4/6/26): 295

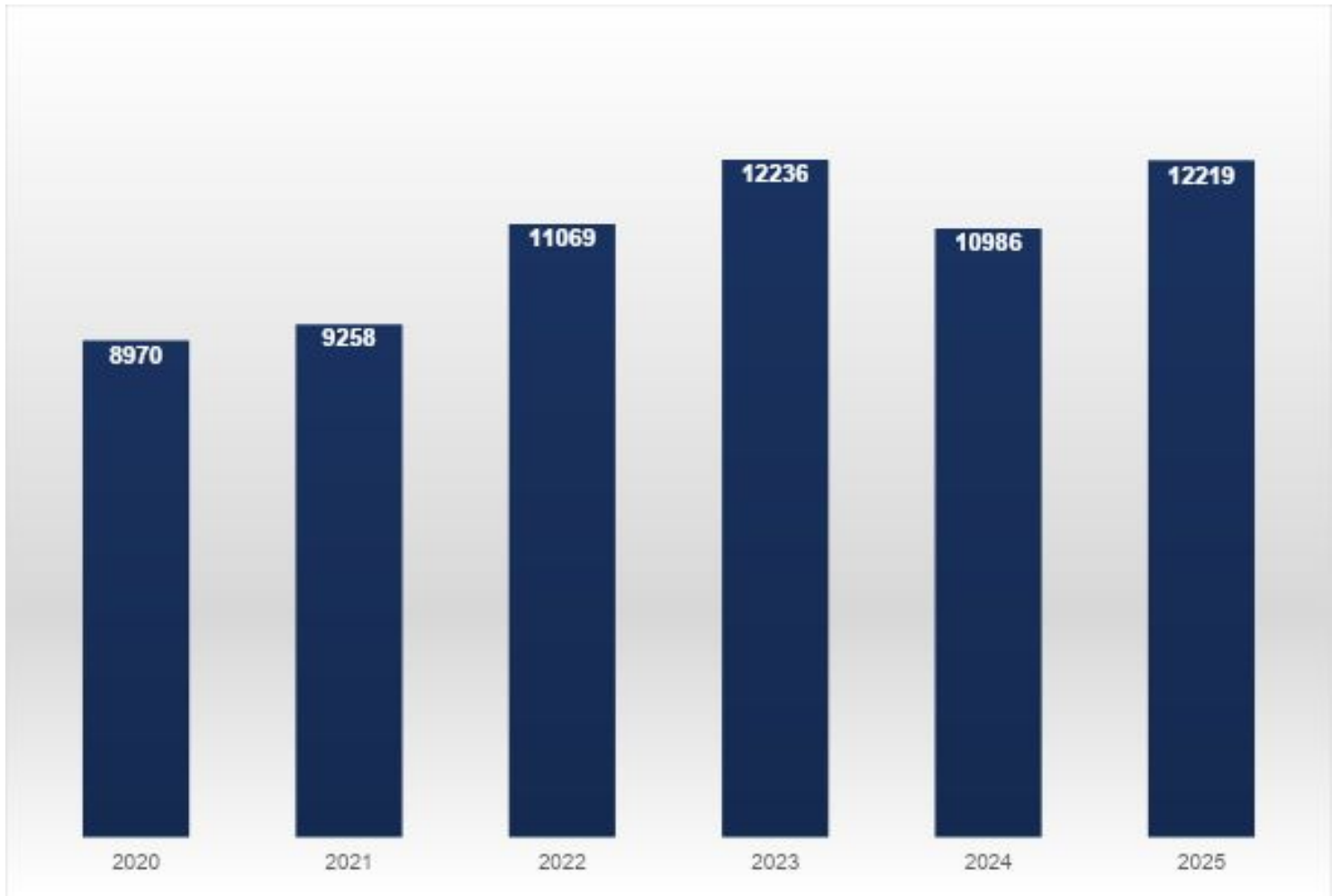
Total # of complaints received March 2026-1190

## Average number of health deficiencies per survey/complaint investigation

- 2020: 7.8 citations per recertification; 2080 complaint investigation onsite (0.3 citations per survey)
- 2025: 9.4 citations per recertification; 2021 complaint investigation onsite (0.4 citations per survey)

## Roadblocks to returning to “normal”:

- Increase in volume of complaints and complaint investigations with citations
- IJ complaints- increase from FY2019 (585) to CY2025 (2,152)

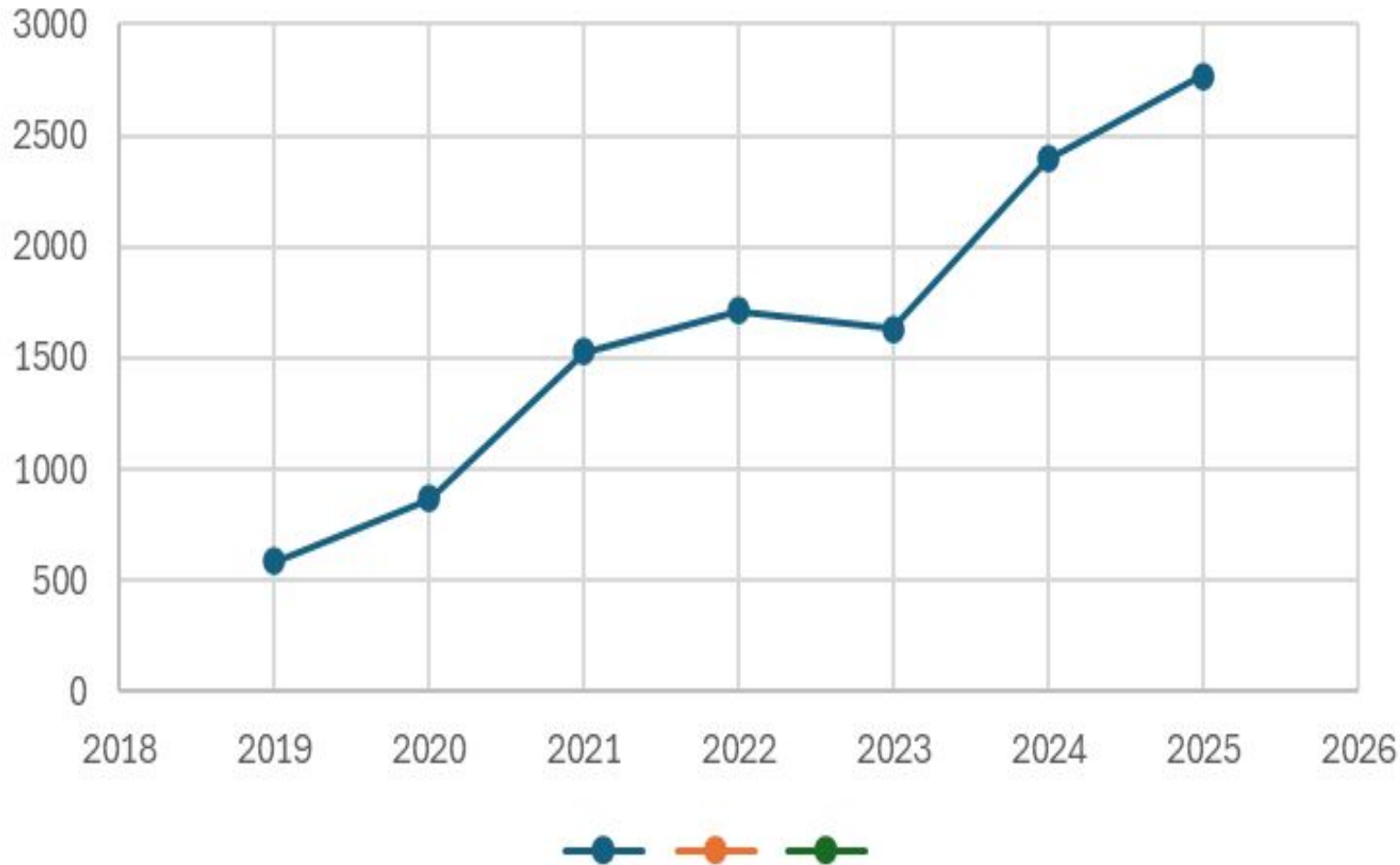


# COMPLAINTS

INCREASE IN TOTAL COMPLAINT  
NUMBERS SINCE 2020

36.2% SINCE 2020

## Number of IJ Complaints Per Fiscal Year



# COMPLAINTS

LARGEST INCREASE IN SEVERE COMPLAINTS

IMMEDIATE JEOPARDY COMPLAINTS (WITHIN 24 HOURS- 7 BUSINESS DAYS) HAVE INCREASED BY 374% IN THIS SAME TIME PERIOD (585 TO 2,770).

NON-IMMEDIATE JEOPARDY HIGH COMPLAINTS (WITHIN 15-18 WORKING DAYS) HAVE INCREASED BY 8.4 % (6,532 TO 7,083).

# REGULATION AND COMPLIANCE UNIT

2025 (7/1/25-4/30/26)

- Immediate Jeopardy/Class I-58
- Uncorrected Class II-74

2024

- Immediate Jeopardy/Class I-106
- Uncorrected Class II Notice of Noncompliance-100

2023

- Immediate Jeopardy/Class I- 129
- Uncorrected Class II Notice of Noncompliance- 99

2022

- Immediate Jeopardy/Class I- 132
- Uncorrected Class II Notice of Noncompliance- 82

## REGULATION UPDATE

- **19 CSR 30-86.047 Administrative, Personnel, and Resident Care Requirements for Assisted Living Facilities**
- The proposed rule for 19 CSR 30-86.047 Administrative, Personnel, and Resident Care Requirements for Assisted Living Facilities was published in the Code of State Regulations on April 30, 2026, and becomes effective May 30, 2026. The official new rule can be found on the Office of the Secretary of State's website at: <https://www.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-86.pdf>.
- The original proposed amendment was published on December 1, 2025 Volume 50, Number 23 in the Missouri Register at: <https://www.sos.mo.gov/CMSImages/AdRules/moreg/2025/v50n23Dec1/v50n23.pdf>
- This amendment corrects the regulatory references to mirror the statutory language for the appropriately trained and qualified individual, updates the criminal background language to mirror statute, corrects the statute number for the required criminal background check, adds the department's website for the employee disqualification list check, updates the department's website for the CNA registry, and removes the requirement for a written statement from a licensed physician or physician's designee indicating a person can work in a long-term care facility.

Overdue Licensures

122

No inspection FY 24

7

No inspection FY 25

## STATE WORKLOAD ACCOMPLISHMENTS

TOTAL # OF LICENSED RCF, ALF,  
AND ADC PROGRAMS: 778

AS OF 5/04/26-175 WITH NO  
INSPECTION IN FY26

**MOST  
FREQUENTLY  
CITED  
DEFICIENCIES-F  
ORMER RCF I  
(JAN-MARCH  
2026)**

- 86.032 (13) Electrical wiring, maintained, inspected
- 86.032 (23) Rooms neat, orderly, cleaned daily
- 86.042 (51) Safe/effective medication system
- 88.010 (29) Privacy/dignity
- 86.022 (9)(C) Fire alarm system – test/maintain
- 86.032 (2) Substantially constructed and maintained
- 86.032 (10) Heaters-approved label, venting, no portable
- 86.032 (18) Extension cords/duplex receptacles
- 86.042 (18) TB screen residents/staff

**MOST  
FREQUENTLY  
CITED  
DEFICIENCIES-F  
ORMER RCF II  
(JAN-MARCH  
2026)**

- 86.032 (2) Substantially constructed and maintained
- 86.032 (13) Electrical wiring, maintained, inspected
- 86.022 (5)(D) Fire drill requirements, evacuation
- 86.022 (9)(C) Fire alarm system -test/maintain
- 86.022 (10)(A) Hazardous area requirements
- 86.022 (11)(B) Sprinkler system maintenance/testing
- 86.022 (17) Oxygen storage requirements
- 86.022 (6)(A) I.- 3. Fire safety training requirements - employees
- 86.022 (8)(C) Exit sign-illumination
- 86.032 (18) Extension cords/duplex receptacles

# MOST FREQUENTLY CITED DEFICIENCIES-ALF (JAN-MARCH 2026)

- 86.047 (46) Safe and effective medication system
- 86.032 (13) Electrical wiring, maintained, inspected
- 86.022 (9)(C) Fire alarm system -test/maintain
- 86.022 (5)(D) Fire drill requirements, evacuation
- 86.047 (19) TB screen residents & staff
- 86.047 (28)(G) Individual service plan – develop
- 86.047 (28)(H) Individual service plan – review requirements
- 86.032 (2) Substantially constructed and maintained
- 86.047 (47) (A) Physician’s orders followed
- 87.030 (65) Nonfood contact surfaces, cleaned as needed

**MOST  
FREQUENTLY  
CITED  
DEFICIENCIES  
ALF  
(ADDITIONAL  
REQUIREMENTS  
(JAN-MARCH  
2026)**

- 86.045 (3)(A)5. Individual evacuation plan – in resident ISP
- 86.045 (3)(A)6.A. Individual evacuation plan – staff requirements
- 86.045 (3)(A)6.C. Individual evacuation plan – evaluate
- 86.045 (3)(A)9. Resident evacuation plan – readily available
- 86.045 (3)(A)10. Comply with all requirements of section (3) of rule
- 86.045 (4)(D) Staffing – resident, more than minimal assistance

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Why It Matters:

- Emergencies are increasing in frequency and complexity
- Residents are more medically complex
- Regulatory expectations are rising
- Reputation and liability risks are real

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

- Fires (resident room, kitchen)
- Tornados resulting in multiple resident relocations
- HVAC system unable to main safe room temperatures (heat and A/C)
- Active Shooter (parking lot, inside facility)
- Car drove through the building
- Strikes/work force shortages
- Fire alarm system and sprinkler system failures
- Water disruption
- Resident elopements

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

The problem with the binder:

- Plans exist but aren't operationalized
- Staff don't know their roles
- Communication breaks down
- Drills are infrequent or unrealistic

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

Beyond the Binder meaning:

- Living, practiced systems
- Staff competency, not just awareness
- Real-time decision-making capability
- Integration into daily operations

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Regulatory Expectations (19 CSR 30-86.022)

- Emergency plans should be:
  - Facility specific
  - Risk-based
  - Tested regularly
  - Documentation should reflect actual practice

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Risk Assessment (All-Hazards Approach)

- Natural (tornado, flood, winter storm)
- Utility failures (power, water, HVAC)
- Human-caused (violence, elopement)
- Public Health (infectious outbreaks)

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

Know your residents:

- Mobility limitations
- Cognitive status
- Medical dependencies (oxygen, medications, dialysis)
- Behavioral health needs

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Staffing realities:

- Call-offs during emergencies
- Staff personal obligations
- Transportation barriers
- Role confusion

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Communications Systems

- Redundant communications methods:
  - Phones, radios, apps
  - Staff call trees
  - Family notification plans
  - Coordination with local emergency management

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Incident Command Basics:

- Clear chain of command
- Defined roles:
  - Incident lead
  - Operations
  - Logistics
  - Communication
  - Scalable structure

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Training That Sticks:

- Move beyond annual in-services
- Micro-training (5-10 min refreshers)
- Scenario-based discussions
- Cross-training staff roles

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Drills That Matter:

- Tabletop exercise
- Functional drills (partial activation)
- Full-scale simulations
- Surprise elements

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Common Drill Pitfalls:

- Over-scripted scenarios
- No evaluation of follow-up
- Same scenario every year
- Lack of leadership involvement

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Emergency Supplies and Logistics:

- Go-kits (meds, records, essentials)
- Backup power planning
- Food/water reserves
- Transportation agreements

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Evacuation vs. Shelter-in-Place:

- Decision-making criteria
- Pre-identified relocation sites
- Transportation coordination
- Resident tracking

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Partnerships Matter:

- Local emergency management
- Fire/EMS
- Hospitals
- Other facilities

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## After Action Reviews:

- What went well?
- What failed?
- What needs to change?
- Assign accountability

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Building a Culture of Preparedness:

- Leadership commitment
- Ongoing reinforcement
- Staff empowerment
- Continuous improvement

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Quick Wins You Can Implement Now:

- Update your call list
- Conduct a 15-minute tabletop drill
- Review top 3 risks
- Clarify staff roles

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

What is your facility's biggest emergency preparedness gap?

- Staffing
- Communication
- Training
- Supplies

# EMERGENCY PREPAREDNESS-BEYOND THE BINDER

## Key Takeaways:

- Preparedness must be operational, not theoretical
- Staff readiness is critical
- Drills reveal truth
- Continuous improvement is essential

# WEATHER CONDITIONS PLANNING

- Because of the variety of weather conditions as well as other events, facilities must have an emergency preparedness plan and be ready to act in an emergency to ensure they are adequately prepared to meet the needs of patients, clients, residents, and participants during disasters and emergency situations.
- **If your facility experiences a loss of a necessary service (electricity, water, gas, phone, etc.), contact SLCR via the Regional Office emergency phone line and keep them informed of their status.** If, for some reason, the facility cannot contact SLCR staff through the regional office phone number, you should contact the hotline. The emergency protocol is located [here](#).
- Facilities should call their local emergency operation center in order to obtain the necessary resources to either stay at the facility or to evacuate, if appropriate. Facilities should also call the regional office designated phone number to keep SLCR informed of their status. If, for some reason, the facility cannot contact SLCR staff through the regional office phone number, they should contact the hotline.

# SLCR EMERGENCY PROTOCOL

Each SLCR regional office has designated a cellular phone number for facilities to call in case of a disaster that results in loss of a necessary service (electricity, water, gas, phone, etc.) This phone number will be answered twenty-four hours a day, seven days a week. The regional office main phone number should be used during normal business hours.

	Main Office Phone Number	Emergency Cell Phone Number
Region 1 (Springfield)	417-895-6435	417-425-8780
Region 2 (Poplar Bluff)	573-840-9580	573-778-6495
Region 3 (Kansas City)	816-889-2818	816-719-0089
Region 4 (Cameron)	816-632-6541	816-632-9371
Region 5 (Macon)	660-385-5763	660-621-2326
Region 6 (Jefferson City)	573-751-2270	573-619-3338
Region 7 (St. Louis)	314-340-7360	314-623-2852

\*\*\*\*\*THIS PROTOCOL IS NOT TO BE USED TO SELF REPORT INCIDENTS NORMALLY REPORTED TO THE ELDERLY ABUSE AND NEGLECT HOTLINE\*\*\*\*\*

# CHALLENGES-LESSONS LEARNED

- Resident transfer agreements (accepting facilities not able to provide for resident needs)
- Facility agreements should include how the accepting facility will be reimbursed
- Accepting facilities over-screening- delaying relocations during emergency
- Security of resident and facility property
- Staff well-being and personal impact of the emergency
- Ability to shelter in place
- Familiarity with emergency preparedness plan (if you left your home for 48 hours- what would you need?)
- Communication
- Who is your village and how can they help with communication and coordination offsite?
- Transportation during icy conditions, road closures (flooding, debris)
- Is YOUR facility equipped to accept residents in the event of an emergency?

***My staff did an amazing job they were able to get all of our residents to safety without even a scratch. Training definitely makes a huge difference!***

## FREE TRAINING!

- On the SLCR Webpage:
  - Office of Dental Health/Mouth Care Without a Battle [SLCR Training](#)
  - POC Webinar for State Licensed Facilities [SLCR Training](#)

## LTCF RESOURCES

- The listserv has been converted over to the GovDelivery email system. For Long-Term Care updates, subscribe to our weekly listserv at: <https://public.govdelivery.com/accounts/MODHSS/subscriber/new?preferences=true> and select “LTCR: Long-Term Care Regulation” under the Subscription Topics.
  - *If you are already signed up for our listserv, you should automatically be converted over to the system.*
- LTC Blog: <https://ltc.health.mo.gov/>
- Rules, Statutes, Provider Information and Directories: <https://health.mo.gov/safety/nursinghomesinspected/index.php>



THANK YOU

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