STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910091	**03/31/2017**
NAME OF PROVIDER OR SUPPLIER **GRAND VILLA OF LAKELAND**	STREET ADDRESS, CITY, STATE, ZIP CODE **2111 LAKELAND HILLS BLVD.** **LAKELAND, FL 33805**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

Assisted Living Facility

An unannounced Limited Nursing Services (LNS) Monitoring visit was conducted on .

The Grand Villa of Lakeland, Assisted Living Facility, License # 6017, had a deficiency at the time of the visit.

N277 - LNS - Resident Care Standards - 58A-5.031(2) FAC

Based on records review and interviews, the facility failed to maintain documentation of a qualified nurse to provide limited nursing services, as needed by residents.

Findings included:

At 10:00am on , a review of the facility's Limited Nursing Services records was conducted. During the records review, it was revealed that the facility had a contract with a registered nurse dated ; however a copy of the Florida State RN license and a copy of the nurse's background screening eligibility were not found in the records.

At 10:30am the Administrator/LNS Supervisor was contacted and the missing records were requested. The Administrator/LNS Supervisor stated that the documents would be located and presented as soon as possible.
At 11:35am, the Administrator/LNS Supervisor stated that they were still trying to locate the RN's license and background screening documents. At 12:30pm, the Administrator/LNS Supervisor stated that the facility's corporate office was searching for the documents and would be forwarding them on to this surveyor.

On , this surveyor received an email from the Administrator/LNS Supervisor, containing attached documents for the LNS nurse (attached Photo3); a contract signed and dated with a different nurse than the one named in the LNS records the day before, a copy of licensing information for the newly contracted nurse, and a copy of background screening qualifications for the nurse named in the contract dated , the day of the facility's Limited Nursing Services monitoring survey.

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SUMMARY STATEMENT OF DEFICIENCIES
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Class III