STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967587	R 01/25/2018
NAME OF PROVIDER OR SUPPLIER **BRENNITY AT MELBOURNE**	STREET ADDRESS, CITY, STATE, ZIP CODE **7365 ORCHESTRA LN** **MELBOURNE, FL 32940**	

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

0000 - Initial Comments

A revisit to a Change of Ownership licensure survey with Extended Congregate Care (ECC) was conducted on . The Brennity at Melbourne, license #11595, had deficiencies at the time of the visit.

0054 - Medication - Records - 58A-5.0185(5) FAC

DEFICIENCY REMAINED UNCORRECTED

Based on observation, Medication Observation Record (MOR) review and interview, the facility failed to ensure the MOR was accurate and up-to-date for 2 of 2 sampled residents (#11 & #16).

Findings:

During a Med Pass observation on at 11:15 AM for resident #16, 25-100 mg tab, give 2 tablets (50-200mg) by mouth every morning. The MOR was not documented as being given at 8 AM on . The same medication was listed on the , 2018 MOR for a 12 PM dose and was not documented as being given on at 12 PM. In addition, , Tab 88mcg, give 1 tablet by mouth once daily was not documented as being given on at 6 AM. There was no documentation on the back of the MOR explaining any of the omissions.

In an interview with resident #16 on at 11:20 AM, the resident stated she did receive her medicines and has not missed any recently.

Review of the , 2018 MOR for resident #11 revealed multiple holes for medications on , , and .

In an interview with the administrator on at 12:00 PM, she confirmed the findings and said she would address the issue with staff.

0167 - Resident Contracts - 58A-5.025 FAC

DEFICIENCY REMAINED UNCORRECTED

Based on record reviews and interview, the facility failed to ensure the resident contract contained all the required information for 1 of 2 resident contracts (#11).

Findings:

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

On at 9:30 AM, the administrator identified resident #11 and said he received Extended Congregate Care (ECC) services for a feeding tube.

Review of the residency contract for resident #11 revealed it was dated on . The contract did not contain a list of ECC services that the resident elected to receive, as required.

On at 2:00 PM, the executive director confirmed the finding and stated she had not updated the contract for resident #11.

Class

E205 - ECC - Health Assessment - 58A-5.030(6) FAC

DEFICIENCY REMAINED UNCORRECTED

Based on record review and interview, the facility failed to ensure a new health assessment (form 1823) was obtained at least annually for a resident (#11) who received an Extended Congregate Care (ECC) service.

Findings:

On at 9:30 am, the administrator identified resident #11 and said he received ECC services for a feeding tube.

Record review for resident #11 revealed a new 1823 dated . The assessment did not contain name, address or phone of provider who signed the form. The form also indicated the resident required Assistance with Self-Administration of Medications, but the resident was bed bound and had a G-tube and took no medications by mouth. His previous assessment documented he required medication administraton.

On at 1:30 pm, the administrator confirmed the resident required medication administration and could not assist with self-administration. She confirmed the provider contact information was missing and said she had overlooked the missing and incorrect information when the new form was obtained.

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967587	R **01/25/2018**
NAME OF PROVIDER OR SUPPLIER **BRENNITY AT MELBOURNE**	STREET ADDRESS, CITY, STATE, ZIP CODE **7365 ORCHESTRA LN** **MELBOURNE, FL 32940**	

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

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on Agency Clearinghouse Website Review and Interview, the facility failed to ensure new employees did not have a break in service of more than 90 days from a position that required screening prior to working with the residents (H).

Findings:

Review of the personnel record for Staff H (hired) revealed a Level 2 background screen with an eligibility date of . The employment history section of her background screen in her file did not include dates for her previous employment. The work history portion of her application did not include dates for when she left her last position.

Review of the Agency's Background Screening website for staff H revealed that she left her previous employment, which required a screening on . From to represents more than a 90-day break in service and required a new Level 2 screening.

In an interview with the business manager on at 2:15 PM, the stated she did not realize the dates on the application were blank and confirmed she did not call to confirm her previous work dates.
Unclassified