STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968003	R 05/13/2019
NAME OF PROVIDER OR SUPPLIER **GRAND VILLA OF MELBOURNE**	STREET ADDRESS, CITY, STATE, ZIP CODE **964 S HARBOUR CITY BLVD** **MELBOURNE, FL 32901**	

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

0000 - Initial Comments

0008 - Admissions - Health Assessment - 429.26( ) FS; 58A-5.0181(2) FAC

Based on resident record review and interview, the facility failed to ensure the health assessment (form 1823) was accurate and complete for 1 of 3 residents sampled (#15).

Findings:

Review of the staff schedule for the week of . . . . -. . . . revealed the facility did not have nurses on duty from 7pm-7am.

Review of the record for resident #15, admitted , revealed a health assessment dated . Diagnoses included . . . . . , ... , and . . . . . . She required assistance with ambulation and transferring, and was documented as independent with eating. The address of the provider was left blank. The section for the type of assistance needed with medications was marked "needs medication administration," which can only be provided by a licensed nurse.

Review of the , Medication Observation Record for resident #15 revealed her medications were provided by unlicensed caregivers at all times of the day and evening for every day in , .

On . . . . at 3:00 PM, the nursing director (DON) stated resident #15 was able to put her pills in her and take them without help. She said she did not believe she required administration. The DON confirmed the 1823 documented the resident required medication administration and stated she was not aware the physician indicated administration. She also confirmed that none of the medications for the month of , were administered by a licensed nurse, only unlicensed caregivers assisted with medications.

Class III

0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC

THIS DEFICIENCY REMAINED UNCORRECTED

Based on record review and interview, the facility failed to ensure it provided care and services

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SUMMARY STATEMENT OF DEFICIENCIES
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appropriate to the needs of 1 of 3 sampled residents (#14) who developed , .

Findings:

On at 1:00PM, a facility nurse provided a listed of residents receiving skilled nursing services from a 3rd party home health provider which included resident #14 for , on upper extremities.

Review of the record for resident #14 revealed she was admitted to the facility on . Her health assessment dated revealed diagnoses which included , , and , . She was documented to be independent with all Activities of Daily Living, including self-administration of medications. The assessment documented she had no , at the time of admission to the facility.

Home health notes provided for review had a start date of which pre-date the resident's admission to the facility. It was noted her left arm was in a . On , the first note after her admission, noted a skilled nursing visit for care on the left . On a skilled nursing note documented a change on the left . On a skilled nursing note documented a change on the left that included measurements of 3.0cm x 1.0cm x 0.1cm. This was the first documented measurement available for review. On , another change was noted. On a skilled nursing note documented measurements for a on the right arm (2.0cm x 0.5cm x 0.1cm) and a left measuring 1.5cm x 7.0cm x 0.1cm. There were no further notes available for review.

Review of facility notes for resident #14 did not find any documentation of observations of or care for any . One electronic note dated at 2:45 PM a note documented the physician saw the resident and ordered a lotion for Xerosis (dry skin) of the . There was no mention of any .

On at 3:30PM, the nursing director stated she was not aware there were measurements of a on the right arm or left . She confirmed she did not have any documentation from any of the facility caregiver or nursing staff describing any observation of or care for any on the arms or of resident #14.

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

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SUMMARY STATEMENT OF DEFICIENCIES
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THIS DEFICIENCY REMAINED UNCORRECTED

Based on personnel record review and interview the facility failed to have evidence that 1 of 2 sampled staff (E) had a statement from a health care provider documenting freedom from communicable , from a health care provider within 30 days of hire.

Findings:

Review of the personnel record for staff E, unlicensed caregiver hired on , did not reveal any documentation from a licensed healthcare provider confirming she was free from communicable

On at 2:45PM, the administrator confirmed the finding.

Class III

0091 - Training - Documentation & Monitoring - 58A-5.0191(12) FAC

Based on personnel record review and interview, the facility failed to have evidence that 1 of 2 sampled staff (E) had proper documentation of completion of required training upon hire.

Findings:

Review of the personnel record for staff E, unlicensed caregiver hired on , revealed certificates for in-services training classes for the following: 2 hour pre-service orientation, control, incident reporting, emergency procedures and evacuation, recognizing & reporting resident , neglect and , elopement and , safe food handling and / . All the certificates were dated either or . None of the certificates were signed by the trainer noted on the certificate.

On at 2:45PM, the administrator reviewed the documentation and confirmed the findings.

Class III

0160 - Records - Facility - 58A-5.024(1) FAC

Based on observation, admission and discharge log review, and interview, the facility failed to ensure an accurate and up-to-date log was maintained for 1of 3 residents sampled (#15).

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SUMMARY STATEMENT OF DEFICIENCIES
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Findings:

Review of the facility census revealed there were 150 residents in the facility on .

Review of the record for resident #15 revealed an admission date of .

Review of the facility's admission and discharge log revealed resident #15 was not listed as a resident.

On at 3:05PM, the administrator confirmed the admission discharge log was not updated.

Class III