| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | **AL11968003** | **05/14/2019** |
| NAME OF PROVIDER OR SUPPLIER<br>**GRAND VILLA OF MELBOURNE** | STREET ADDRESS, CITY, STATE, ZIP CODE<br>**964 S HARBOUR CITY BLVD**<br>**MELBOURNE, FL 32901** | |

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

**0000 - Initial Comments**

A complaint investigation (#2019004596) was conducted at Grand Villa of Melbourne Assisted Living Facility, License #11991 on . The facility had deficiencies at the time of the survey visit.

**0084 - Training - Assis Self-Admin Meds & Med Mgmt - 58A-5.0191(6) FAC 429.52 (6), FS**

Based on personnel record review and interview, the facility failed to ensure 1 of 6 direct care staff (D) completed 2 hours of continuing education training annually with providing assistance with self-administration of medications.

Findings:

Staff D's personnel record review revealed a hire date . A 4-hour medication training with self-administration dated was completed by the pharmacist, but there was no evidence of the updated 2-hour continued education medication training as required. The staff work schedule (week - ) reviewed showed that staff D works the overnight shift (10 PM-6 AM) and there are no nurses working during this shift to assist with self-administration of medications.

On at 3:30 PM, an interview with the Administrator and Business Office Manager confirmed the finding.

Class III

**0086 - Training - ADRD - 58A-5.0191(10) FAC**

Based on personnel record review and interview, the facility failed to ensure that 1 of 4 sampled staff (B) completed 4 hours Level 1 and Related (ADRD) training within 3 months of employment and completed 4 hours Level 2 ADRD training within 9 months of employment as required.

Findings:

Staff B's personnel record review revealed hire date of . There was no documented evidence that 4 hours of Level 1 within 3 months and 4 hours of Level 2 within 9 months of the ADRD training completed.

| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | **AL11968003** | **05/14/2019** |
| NAME OF PROVIDER OR SUPPLIER<br>**GRAND VILLA OF MELBOURNE** | STREET ADDRESS, CITY, STATE, ZIP CODE<br>**964 S HARBOUR CITY BLVD**<br>**MELBOURNE, FL 32901** | |

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

On at 3:45 PM, an interview with Administrator and Business Office Manager confirmed the findings.

Class III

**0161 - Records - Staff - 429.275(2) FS; 58A-5.024(2) FAC**

Based on personnel record review and interview, the facility failed to obtain a copy of the job description for 1 of 4 sampled staff (D) for a facility with a licensed capacity of 17 or more residents.

Findings:

Staff D's personnel record review revealed hire date of . There was no documented evidence of the job description as required on file.

On at 3:30 PM, an interview with Administrator and Business Office Manager confirmed the finding.

Class