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| STATEMENT OF DEFICIENCIES                        | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>AL11968483</b>             | (X3) DATE SURVEY COMPLETED<br><br><b>11/07/2018</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>VIERA</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>3325 BRESLAY DR<br/>MELBOURNE, FL 32940</b> |                                                     |

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

**0000 - Initial Comments**

A complaint investigation (CCR#2018013490) was conducted on Viera, 3325 Breslay Drive, Melbourne 32940 (LIC#12361) had a deficiency the time of the visit.

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

Based on interviews and record reviews the facility failed to document accurately on the Medication Observation Record (MOR) for 2 (Residents#1 & #2) residents out of 8 (Residents# ) sampled residents.

Findings:

1. During a review on of Resident# 's Medication Observation Records (MORs), it confirmed on that on , for the 8 am medication time, staff had not signed off on the MORs and then staff could not determine if the medication for 2x a day starting at 8am for a week was administered to Resident#1. In further review of the MORs for Resident#2, it confirmed on and on the medication , 112 mg tab, physician ordered to be given 1 tablet 1x per day at 8am was also not signed off by staff and then staff could not determine if the medication was given on those dates.
2. In interviews on at various times starting at 10 am with the Administrator and the Wellness Director, they confirmed the MORs was missing the staff initials for signing off on the medications and no documentation for explanation was given on for Resident#1 and on and for Resident#2. They confirmed they were not aware of the discrepancy until now and could not determine if Residents #1 and 2 had received their medications on those dates.
3. In an interview on at 10:30 with Staff A, she confirmed the MORs were not signed off by staff for Resident#1 on and for Resident#2 on and for the 8am medication times. She revealed there was no explanation by staff on the MORs and therefore could not determine if the medications were administered to Resident#1 and 2 on those dates and times.
4. In an interview on at PM with Resident#1, she revealed the staff did miss a medication time in the past for , but could not recall the date or time.
5. In an interview on at 11:30am with Resident#2, he revealed the staff did not give him his medication for on two occasions but could not recall the dates or times.

Based on observation, record reviews and interviews the facility failed to document (sign off on the MORs) accurately on the Medication Observation Record (MORs), without the administration or staff being able to determine if the resident received the medications on the above dates.

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| SUMMARY STATEMENT OF DEFICIENCIES<br>(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION) |                                                                                         |                                                     |
| Class III                                                                                               |                                                                                         |                                                     |