



Summary Statement of Deficiencies	Plan of Correction	Completion Date
<p>the resident, their legal representative, licensed practitioner and facility representative. (Resident #2)</p> <p>Finding:</p> <p>Surveyor reviewed Resident #2's July 2025 Medication Administration Record (MAR). The MAR documented Resident #2 had an albuterol inhaler prescribed as needed.</p> <p>Surveyor reviewed Resident #2's record which did not show evidence of a signed order for the medication. Surveyor observed Resident #2's medication storage and did not locate the medication.</p> <p>Certified Residential Medication Aide (CRMA) was interviewed at approximately 1:50 p.m. on 7/8/2025 and was not able to provide a signed order for the medication, however stated Resident #2 carries the medication on them to use as needed.</p> <p>Resident #2 showed Surveyor an inhaler that they carried in a case with them. There was no written label on the inhaler.</p> <p>On 7/8/2025 at approximately 2:15 p.m., this finding was reviewed with CRMA and submitted via email to the Administrator on 7/8/2025.</p>		