

Office of Health Care Assurance



State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION




Facility's Name: Caring Manoa	CHAPTER 100.1
Address: 2383 Beckwith Street, Honolulu, Hawaii 96822	Inspection Date: June 10, 2015 Annual

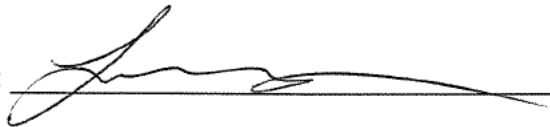
	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-10 <u>Admission policies.</u> (d) The Type I ARCH shall only admit residents at appropriate levels of care. The capacity of the Type I ARCH shall also be limited by this chapter, chapter 321, HRS, and as determined by the department.</p> <p>FINDINGS</p> <div style="background-color: black; width: 100%; height: 100%; min-height: 150px;"></div>	The Home has forwarded Office findings to the PCP and is awaiting Physician's determination of the Resident's level of care upon the next doctor's visit in August 2015.	August 31, 2015
<input checked="" type="checkbox"/>	<p>§11-100.1-12 <u>Emergency care of residents and disaster preparedness.</u> (b) The licensee shall maintain a first aid kit for emergency use</p>		

	<p>for each Type I ARCH.</p> <p>FINDINGS First aid kit contained the following medications:</p> <ul style="list-style-type: none"> • Neosporin antibiotic ointment • Motrin Ibuprofen 200mg tablets 	<p>The Home has discarded the medications noted and has assembled a first aid kit in-house without medications not ordered by residents' physicians.</p>	<p>July 17, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-13 <u>Nutrition.</u> (l) Special diets shall be provided for residents only as ordered by their physician or APRN. Only those Type I ARCHs licensed to provide special diets may admit residents requiring such diets.</p> <p>FINDINGS [REDACTED]</p>	<p>The Home has clarified diet type with the Physician. The Home has counseled the PCG that all diet orders must address both type and any special modifications.</p>	<p>June 12, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications.</u> (b) Drugs shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security. Medications that require storage in a refrigerator shall be properly labeled and kept in a separate locked container.</p> <p>FINDINGS Refrigerated medication container was not locked.</p>	<p>The Home has reminded staff about its policies regarding proper storage of medications.</p>	<p>July 17, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications.</u> (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p>FINDINGS [REDACTED]</p>	<p>[REDACTED] The Home has revised its Medication List to PCP that clearly states whether or not medications are to be crushed.</p>	<p>August 31, 2015</p>

<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications.</u> (f) Medications made available to residents shall be recorded on a flowsheet. The flowsheet shall contain the resident's name, name of the medication, frequency, time, date and by whom the medication was made available to the resident.</p> <p>FINDINGS</p> 	<p>Medication duration completed, however, physician did not remove from Medication List to PCP, nor intended to continue the medication. The Home has revised its Medication List to PCP that clarifies when medications shall be discontinued.</p>	<p>July 17, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (b)(4) During residence, records shall include:</p> <p>Entries describing treatments and services rendered;</p> <p>FINDINGS</p> 	<p>The Home has counseled PCG to include in the resident's Monthly Summary whether or not medications are crushed. PCG has commenced recording in the May 2015 progress notes that medications are crushed.</p>	<p>July 17, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (g)(3)(D) Fire prevention protection.</p> <p>Type I ARCHs shall be in compliance with, but not limited to, the following provisions:</p> <p>A drill shall be held to provide training for residents and personnel at various times of the day or night at least four times a year and at least three months from the previous drill, and the record shall contain the date, hour, personnel participating and description of drill, and the time taken to safely evacuate residents from the building. A copy of the fire drill procedure and results shall be submitted to the fire inspector or department upon request;</p>	<p>Staff has been reminded to double-check that their names are present in the drill report when participating.</p>	<p>June 30, 2015</p>

	<p><u>FINDINGS</u> Fire drill conducted on April 30, 2015 did not list the names of staff participating in the drill.</p>		
<input checked="" type="checkbox"/>	<p>§11-100.1-55 <u>Nutrition and food sanitation.</u> (2) In addition to the requirements in section 11-100.1-13 the following shall apply to all Type II ARCHs:</p> <p>All consultant dietitians shall provide special diet training for food preparation staff and ensure staff competency;</p> <p><u>FINDINGS</u> No documentation that the Consultant R.D. provided training on modified consistency diets.</p>	The Home has revised its training curriculum form to include Registered Dietitian in-service training.	July 17, 2015
<input checked="" type="checkbox"/>	<p>§11-100.1-83 <u>Personnel and staffing requirements.</u> (1) In addition to the requirements in subchapter 2 and 3:</p> <p>A registered nurse other than the licensee or primary care giver shall train and monitor primary care givers and substitutes in providing daily personal and specialized care to residents as needed to implement their care plan;</p> <p><u>FINDINGS</u> No documentation of care giver training [REDACTED]</p>	The Home now maintains an electronic record of training expiration dates to notify PCG and SCG when retraining is due.	July 17, 2015
<input checked="" type="checkbox"/>	<p>§11-100.1-88 <u>Case management qualifications and services.</u> (c)(2) Case management services for each expanded ARCH resident shall be chosen by the resident, resident's family or surrogate in collaboration with the primary care giver and physician or APRN. The case manager shall:</p> <p>Develop an interim care plan for the expanded ARCH resident within forty eight hours of admission to the expanded ARCH and a care plan within seven days of admission. The care plan</p>		

	<p>shall be based on a comprehensive assessment of the expanded ARCH resident's needs and shall address the medical, nursing, social, mental, behavioral, recreational, dental, emergency care, nutritional, spiritual, rehabilitative needs of the resident and any other specific need of the resident. This plan shall identify all services to be provided to the expanded ARCH resident and shall include, but not be limited to, treatment and medication orders of the expanded ARCH resident's physician or APRN, measurable goals and outcomes for the expanded ARCH resident; specific procedures for intervention or services required to meet the expanded ARCH resident's needs; and the names of persons required to perform interventions or services required by the expanded ARCH resident;</p> <p>FINDINGS </p>	<p>Case Manager has updated care plan to include specific feeding procedures. The Home has reminded Resident's Case Manager of the Chapter requirements for case management services and care plan.</p>	<p>July 17, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-88 <u>Case management qualifications and services.</u> (c)(4) Case management services for each expanded ARCH resident shall be chosen by the resident, resident's family or surrogate in collaboration with the primary care giver and physician or APRN. The case manager shall:</p> <p>Update the care plan as changes occur in the expanded ARCH resident care needs, services and/or interventions;</p> <p>FINDINGS  </p>	<p>Case Manager has updated care plan. The Home has reminded Resident's Case Manager of the Chapter requirements for case management services and care plan.</p>	<p>July 17, 2015</p>

Licensee/Administrator's Signature: 
Print Name: TODD PANG
Date: 7/17/15

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Address: 2383 Beckwith Street, Honolulu, Hawaii 96822	Inspection Date: June 10, 2015 Annual




	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-10 <u>Admission policies.</u> (d) The Type I ARCH shall only admit residents at appropriate levels of care. The capacity of the Type I ARCH shall also be limited by this chapter, chapter 321, HRS, and as determined by the department.</p> <p>FINDINGS</p> <div style="background-color: black; width: 100%; height: 100%; min-height: 100px;"></div>	<p>The Home forwarded Office findings to the PCP and received the Resident's level of care assessment from the PCP. [REDACTED]</p> <p>[REDACTED] The Home has adopted a policy to coach incoming residents and their attorney in fact on the definitions of Level of Care. The Home has created a Level of Care instruction form, based on the Office's Form ARCH N 2A, that shall be provided to residents and PCP upon physician visits at least annually, to encourage accurate level of care assessment upon any change of status.</p>	June 30, 2015
<input checked="" type="checkbox"/>	<p>§11-100.1-12 <u>Emergency care of residents and disaster preparedness.</u> (b) The licensee shall maintain a first aid kit for emergency use</p>		

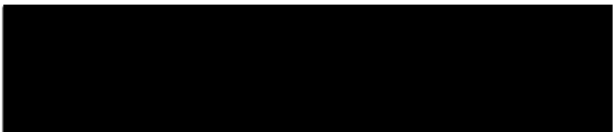


The Home has discarded the medications noted and has assembled a first aid kit in-house without medications not ordered by residents' physicians. The Home has adopted a policy that all store-bought first aid kits shall have specific

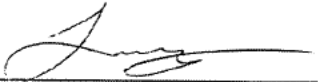
	<p>for each Type I ARCH.</p> <p>FINDINGS First aid kit contained the following medications:</p> <ul style="list-style-type: none"> • Neosporin antibiotic ointment • Motrin Ibuprofen 200mg tablets 	<p>items removed and discarded prior to use by the Home as per Office rules (aspirin & ibuprofen tablets, antibiotic ointments, burn relief gel packs, and decongestible tablets). The Primary Care Giver shall be responsible to ensure that the Home's first aid kit is kept up to date and shall review its contents no less than annually.</p>	<p>August 1, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-13 <u>Nutrition. (l)</u> Special diets shall be provided for residents only as ordered by their physician or APRN. Only those Type I ARCHs licensed to provide special diets may admit residents requiring such diets.</p> <p>FINDINGS [REDACTED]</p>	<p>The Home has clarified diet type with the Physician. The Home has counseled the PCG that all diet orders must address both type and any special consistency modifications. The Home has created a physician's Diet Order Form that clarifies diet type and food and liquid consistency upon order.</p>	<p>August 1, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications. (b)</u> Drugs shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security. Medications that require storage in a refrigerator shall be properly labeled and kept in a separate locked container.</p> <p>FINDINGS Refrigerated medication container was not locked.</p>	<p>The Home has reminded staff about its policies regarding proper storage of medications. The Home has created an operations oversight log to monitor proper storage of medications on a daily basis and alert the PCG if staff is not following medication storage policies. The PCG is responsible to conduct internal audits, and provide training, coaching, or discipline for care givers to comply with Chapter rules.</p>	<p>August 1, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications. (e)</u> All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p>FINDINGS [REDACTED]</p>	<p>[REDACTED] The Home has amended its training program to require care givers to provide medications exactly as prescribed. The Home has revised its Medication List provided to the PCP that prompts the PCG to note whether or not medications are ordered to be crushed.</p>	<p>August 1, 2015</p>

<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications.</u> (f) Medications made available to residents shall be recorded on a flowsheet. The flowsheet shall contain the resident's name, name of the medication, frequency, time, date and by whom the medication was made available to the resident.</p> <p>FINDINGS [REDACTED]</p>	<p>Medication duration completed as ordered and therefore not listed on the Medication Record as cited. However, the physician did not remove the medication the from Medication List, despite no intention to continue the medication beyond finite order duration. To prevent a similar deficiency in the future, the Home has revised its Medication List provided to the PCP that prompts the PCG to note when medications shall be discontinued and be removed from the Medication List.</p>	<p>November 27, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (b)(4) During residence, records shall include:</p> <p>Entries describing treatments and services rendered;</p> <p>FINDINGS [REDACTED]</p>	<p>The Home has counseled PCG to include in the resident's Monthly Summary whether or not medications are crushed. PCG has commenced recording in the May 2015 progress notes that medications are crushed. To prevent a similar deficiency in the future, the Home has updated its Monthly Summary checklist to prompt PCG to include in the Progress Notes confirmation that medications are crushed.</p>	<p>August 1, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (g)(3)(D) Fire prevention protection.</p> <p>Type I ARCHs shall be in compliance with, but not limited to, the following provisions:</p> <p>A drill shall be held to provide training for residents and personnel at various times of the day or night at least four times a year and at least three months from the previous drill, and the record shall contain the date, hour, personnel participating and description of drill, and the time taken to safely evacuate residents from the building. A copy of the fire drill procedure and results shall be submitted to the fire inspector or department upon request;</p>	<p>Staff has been reminded to double-check that their names are present in the drill report when participating. The PCG has been counseled to ensure that participating staff must sign their names on the drill report. To prevent a similar deficiency in the future, the Home shall require the Administrator to double-check staff signatures on all fire-drill reports.</p>	<p>August 1, 2015</p>

	<p>FINDINGS Fire drill conducted on April 30, 2015 did not list the names of staff participating in the drill.</p>		
<input checked="" type="checkbox"/>	<p>§11-100.1-55 <u>Nutrition and food sanitation.</u> (2) In addition to the requirements in section 11-100.1-13 the following shall apply to all Type II ARCHs:</p> <p>All consultant dietitians shall provide special diet training for food preparation staff and ensure staff competency;</p> <p>FINDINGS No documentation that the Consultant R.D. provided training on modified consistency diets.</p>	<p>The Consultant R.D. has provided retraining on modified consistency diets. To prevent a similar deficiency in the future, the Consultant R.D. will provide retraining on modified consistency diets not less than annually. The Home has created an electronic record of training expiration dates, and the PCG shall be responsible to schedule annual retraining with the Consultant R.D.</p>	November 27, 2015
<input checked="" type="checkbox"/>	<p>§11-100.1-83 <u>Personnel and staffing requirements.</u> (1) In addition to the requirements in subchapter 2 and 3:</p> <p>A registered nurse other than the licensee or primary care giver shall train and monitor primary care givers and substitutes in providing daily personal and specialized care to residents as needed to implement their care plan;</p> <p>FINDINGS [REDACTED]</p>	<p>[REDACTED] To prevent a similar deficiency in the future, the Home's R.N. will provide retraining on medication administration not less than annually. The Home has created an electronic record of training expiration dates, and the PCG shall be responsible to schedule annual retraining with the Home's R.N.</p>	November 27, 2015
<input checked="" type="checkbox"/>	<p>§11-100.1-88 <u>Case management qualifications and services.</u> (c)(2) Case management services for each expanded ARCH resident shall be chosen by the resident, resident's family or surrogate in collaboration with the primary care giver and physician or APRN. The case manager shall:</p> <p>Develop an interim care plan for the expanded ARCH resident within forty eight hours of admission to the expanded ARCH and a care plan within seven days of admission. The care plan</p>		

	<p>shall be based on a comprehensive assessment of the expanded ARCH resident's needs and shall address the medical, nursing, social, mental, behavioral, recreational, dental, emergency care, nutritional, spiritual, rehabilitative needs of the resident and any other specific need of the resident. This plan shall identify all services to be provided to the expanded ARCH resident and shall include, but not be limited to, treatment and medication orders of the expanded ARCH resident's physician or APRN, measurable goals and outcomes for the expanded ARCH resident; specific procedures for intervention or services required to meet the expanded ARCH resident's needs; and the names of persons required to perform interventions or services required by the expanded ARCH resident;</p> <p>FINDINGS </p>	<p>Case Manager has updated care plan to include specific feeding procedures. The Home has reminded the resident's Case Manager of the Chapter requirements for case management services and maintaining an up-to-date care plan. The Home has developed a Care Plan Checklist to prompt Case Manager to include specific feeding procedures for a resident who requires assistance with feeding. The PCG shall review the Care Plan Checklist upon each Case Manager visit to verify that the Case Manager has updated the care plan according to the resident's current status.</p>	<p>August 1, 2015</p>
<p><input checked="" type="checkbox"/></p>	<p>§11-100.1-88 <u>Case management qualifications and services.</u> (c)(4) Case management services for each expanded ARCH resident shall be chosen by the resident, resident's family or surrogate in collaboration with the primary care giver and physician or APRN. The case manager shall:</p> <p>Update the care plan as changes occur in the expanded ARCH resident care needs, services and/or interventions;</p> <p>FINDINGS  </p>		

  	<p>Case Manager has updated the care plan to address resident's changed status. The Home has reminded the resident's Case Manager of the Chapter requirements for case management services and maintaining an up-to-date care plan. The Home has developed a Care Plan Checklist to prompt Case Manager to include, modify, or remove specific care plan interventions according to the resident's status. The PCG shall review the Care Plan Checklist upon each Case Manager visit to verify that the Case Manager has updated the care plan according to the resident's current status.</p>	August 1, 2015
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Licensee/Administrator's Signature: 
Print Name: Todd Pang
Date: November 27, 2015