

Office of Health Care Assurance

State Licensing Section

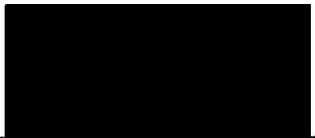
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Salvador, Catherine (ARCH/ Expanded ARCH)	CHAPTER 100.1
Address: 2318 Awapuhi Street, Hilo, Hawaii 96720	Inspection Date: November 4, 2015 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<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</p> <div style="background-color: black; height: 40px; width: 100%;"></div>	SEE ATTACHED COPY	
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (g)(3)(I)(i) Fire prevention protection.</p> <p>Type I ARCHs shall be in compliance with, but not limited to, the following provisions:</p> <p>Each resident of a Type I home must be certified by a physician that the resident is ambulatory and capable of</p>		

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>following directions and taking appropriate action for self-preservation under emergency conditions, except that a maximum of two residents, not so certified, may reside in the Type I home provided that either:</p> <p>For each such non-certified resident there must be a responsible adult on the premises of the home at all times that the non-certified resident is present in the home, and there must never be a stairway which must be negotiated for emergency exit by such non-certified resident;</p> <p><b>FINDINGS</b></p> <p><i>Please clarify with resident's physician and submit updated self-preservation statements for all residents with your plan of correction.</i></p>	<p>SEE ATTACHED COPY</p>	

Licensee/Administrator's Signature: \_\_\_\_\_



Print Name: \_\_\_\_\_

CATHERINE SALVADOR

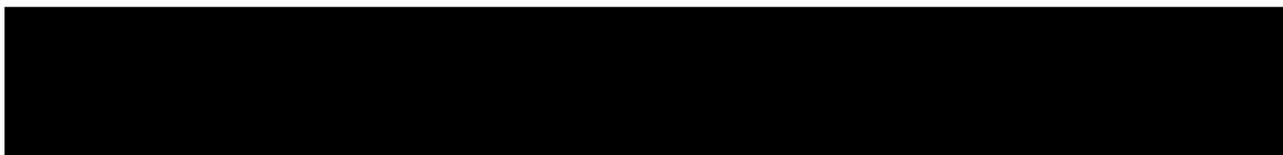
Date: \_\_\_\_\_

12-22-15

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

11-100.1-15 Medications. (e)

### FINDINGS

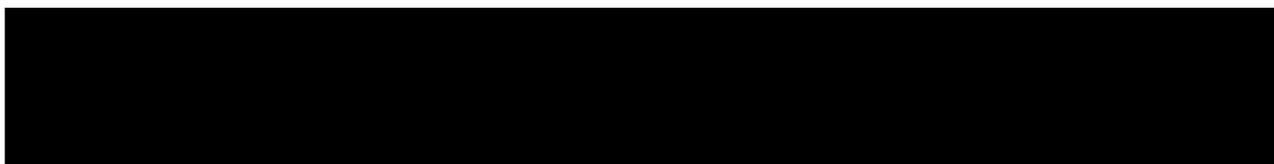


Plan of Correction: In the future when I have a new order I double check to make sure I document beginning on the right day, in order to avoid deficiency in the future.

Completion date: November 4, 2015

11-100.1-23 Physical environment. (g)(3)(l)(i)

### FINDINGS



Plan of correction: [REDACTED]

[REDACTED] In the future if I have more than two and I would discharge one non self-preserving resident, in order to avoid deficiency in the future.

Completion date: November 18, 2015