

Office of Health Care Assurance



State Licensing Section




STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Faith Harbor Adult Care	CHAPTER 100.1
Address: 5783 Kalaniana'ole Highway, Honolulu, Hawaii 96821	Inspection Date: April 7, 2015 Annual

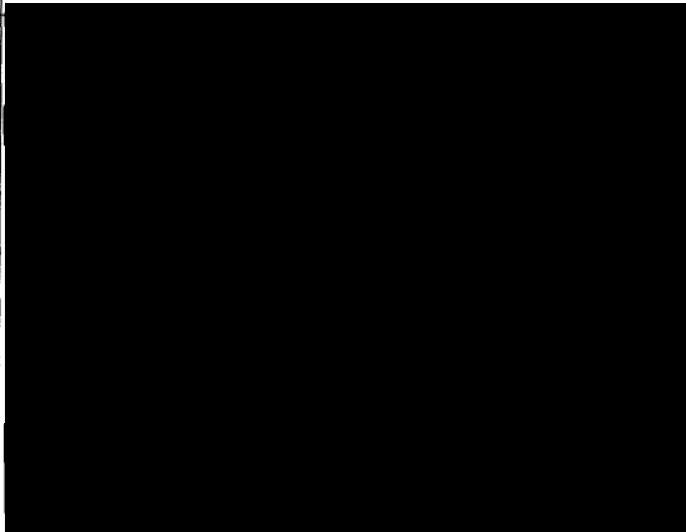
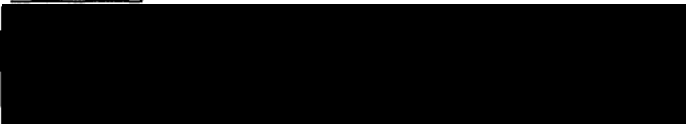
	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-8 <u>Primary care giver qualifications.</u> (a)(10) The licensee of a Type I ARCH acting as a primary care giver or the individual that the licensee has designated as the primary care giver shall:</p> <p>Attend and successfully complete a minimum of six hours of training sessions per year which shall include but not be limited to any combination of the following areas: personal care, infection control, pharmacology, medical and behavioral management of residents, diseases and chronic illnesses, community services and resources. All inservice training and other educational experiences shall be documented and kept current;</p> <p>FINDINGS [REDACTED] - No training sessions. Submit copies of six (6) training sessions for the 2014-2015 inspection year with the plan of correction.</p>	<p>SEE ATTACHED Explanation + proof of classes</p>	

	Rules (Criteria)	Plan of Correction	Completion Date
☒	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (a) All individuals who either reside or provide care or services to residents in the Type I ARCH, shall have documented evidence that they have been examined by a physician prior to their first contact with the residents of the Type I ARCH, and thereafter shall be examined by a physician annually, to certify that they are free of infectious diseases.</p> <p>FINDINGS [REDACTED] No examination by a physician prior to contact with residents.</p>	<p>SEE ATTACHED</p> <p>Explanation + check list</p>	
☒	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (b) All individuals who either reside or provide care or services to residents in the Type I ARCH shall have documented evidence of an initial and annual tuberculosis clearance.</p> <p>FINDINGS [REDACTED] No documentation of a chest x-ray following a positive tuberculosis (TB) skin test. [REDACTED] No two-step TB clearance.</p>	<p>SEE ATTACHED</p> <p>Explanation + check list</p>	
☒	<p>§11-100.1-10 <u>Admission policies.</u> (a) Type I ARCHs shall admit residents requiring care as stated in section 11-100.1-2. The level of care needed by the resident shall be determined and documented by that resident's physician or APRN prior to admission. Information as to each resident's level of care shall be obtained prior to a resident's admission to a Type I ARCH and shall be made available for review by the department, the resident, the resident's legal guardian, the resident's responsible placement agency, and others authorized by the resident to review it.</p>	<p>SEE ATTACHED</p> <p>Explanation</p>	

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>FINDINGS  - No level of care at the time of readmission on</p>		
<input checked="" type="checkbox"/>	<p>§11-100.1-13 <u>Nutrition.</u> (d) Current menus shall be posted in the kitchen and in a conspicuous place in the dining area for the residents and department to review.</p> <p>FINDINGS Menu was not posted in the dining area.</p>	<p>SEE ATTACHED Explanation</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 </p>	<p>SEE ATTACHED Explanation + Lyrica order copy</p>	

	Rules (Criteria)	Plan of Correction	Completion Date
		<p>SEE ATTACHED Explanation + corrected MAR sample + vitals page sample</p>	
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications.</u> (g) All medication orders shall be reevaluated and signed by the physician or APRN every four months or as ordered by the physician or APRN, not to exceed one year.</p> <p>FINDINGS  - Medication was not updated  a period of 5 months.</p>	<p>SEE ATTACHED Explanation + corrected MAR SAMPLE</p>	
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (a)(1) The licensee or primary care giver shall maintain individual records for each resident. On admission, readmission, or transfer of a resident there shall be made available by the licensee or primary care giver for the department's review:</p>		

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>Documentation of primary care giver's assessment of resident upon admission;</p> <p>FINDINGS ██████████ – No admission assessment by the PCG at the time of ██████████</p>	<p>SEE ATTACHED + Explanation</p> <p>DEFICIENCY ADDRESSED IN 11-100.1-10(A) COMMENTS</p>	
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (a)(6) The licensee or primary care giver shall maintain individual records for each resident. On admission, readmission, or transfer of a resident there shall be made available by the licensee or primary care giver for the department's review:</p> <p>Physician or APRN signed orders for diet, medications, and treatments;</p> <p>FINDINGS ██████████ No admission diet, medication and treatment orders at the time of readmission on ██████████</p>	<p>SEE ATTACHED + Explanation</p> <p>DEFICIENCY ADDRESSED IN 11-100.1-10(A) COMMENTS</p>	
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (b)(3) During residence, records shall include:</p> <p>Progress notes that shall be written on a monthly basis, or more often as appropriate, shall include observations of the resident's response to medication, treatments, diet, care plan, any changes in condition, indications of illness or injury, behavior patterns including the date, time, and any and all action taken. Documentation shall be completed immediately when any incident occurs;</p> <p>FINDINGS ██████████ No progress notes for ██████████ and ██████████</p>	<p>SEE ATTACHED Explanation + copy of posted checklist</p>	

	Rules (Criteria)	Plan of Correction	Completion Date
		<p>SEE ATTACHED Explanation + copy of checklist posted in kitchen now</p>	
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (c) Unusual incidents shall be noted in the resident's progress notes. An incident report of any bodily injury or other unusual circumstances affecting a resident which occurs within the home, on the premises, or elsewhere shall be made and retained by the licensee or primary care giver under separate cover, and shall be made available to the department and other authorized personnel. The resident's physician or APRN shall be called immediately if medical care may be necessary.</p> <p>FINDINGS</p> 	<p>SEE ATTACHED Explanation</p>	

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (h)(1) Miscellaneous records:</p> <p>A permanent general register shall be maintained to record all admissions and discharges of residents;</p> <p>FINDINGS</p> <div style="background-color: black; height: 20px; width: 100%;"></div>	<p>SEE ATTACHED Explanation</p>	

Licensee/Administrator's Signature: _____

Print Name: _____

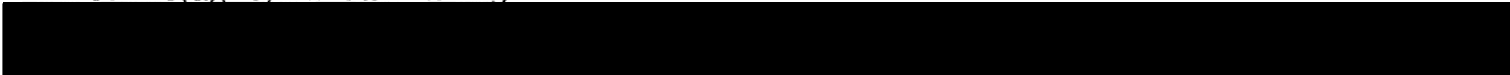
Date: _____

April 28, 2015

Faith Harbor Adult Care

Plan of Correction:

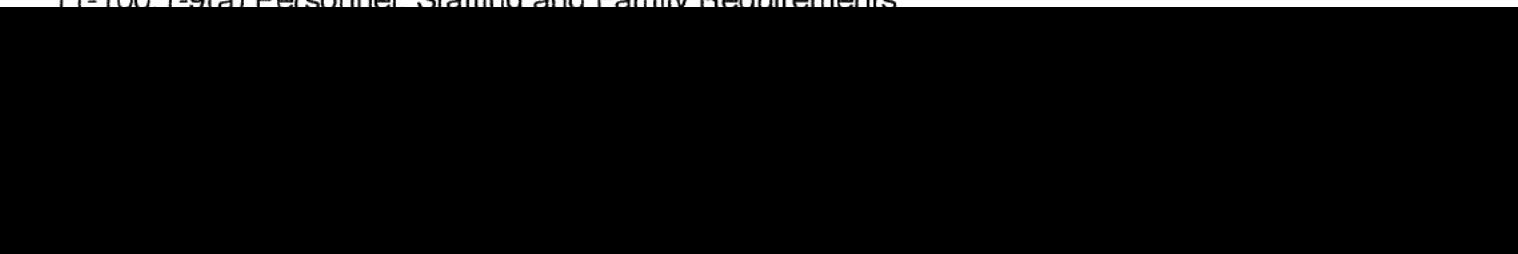
11-100-1-8(a)(10) Annual Training

- 
1. This deficiency has been corrected by attending and completing the 6 hours of training as required. All forms of proof will be submitted along with the plan of corrections for the Department of Health's review.
 2. In the future, to ensure that all required annual training sessions are completed in time and a similar deficiency is avoided, the PCG has created a separate chart, that will be posted up in the PCG's computer area. The chart will have grids with specifying information (date, time, duration, and presenter), and will serve as a visual reminder to complete the sessions by their due date. The PCG will also search all upcoming seminars and training sessions available in the community, sign up for any possible mailing lists that inform of such trainings, and mark the calendar of the upcoming session (covering appropriate subjects to our patient care, and operations/organization of care home). PCG is also looking into becoming a part of ARCA (Adult Residential Carehome Association), which provides training sessions for care home operators on the quarterly basis.

Completion Date: April 22, 2015

Vera Popova PCG Vera Popova

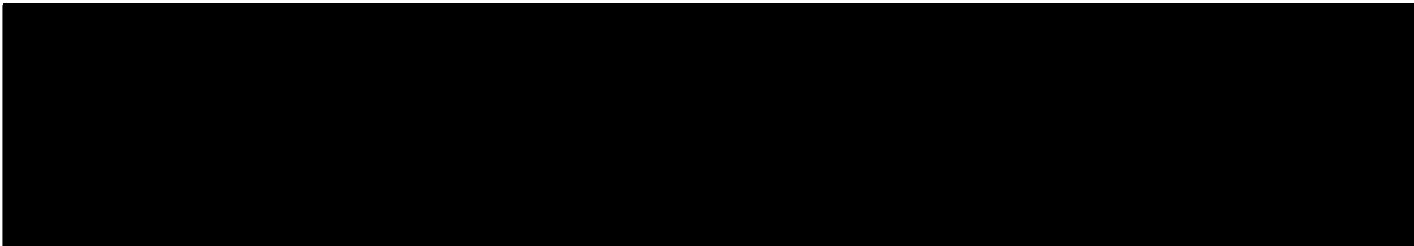
11-100-1-9(a) Personnel, Staffing and Family Requirements

- 
2. In the future Faith Harbor will no longer allow contact with residents by SCG's until all required paperwork has been received. To ensure that similar deficiency does not happen again, Faith Harbor has created a checklist outlining all required documents for all new SCG's prior to their first contact with the residents (see attached).

Completion Date: April 18, 2015

Vera Popova PCG Vera Popova

11-100-1-9(b) Personnel, Staffing and Family Requirements




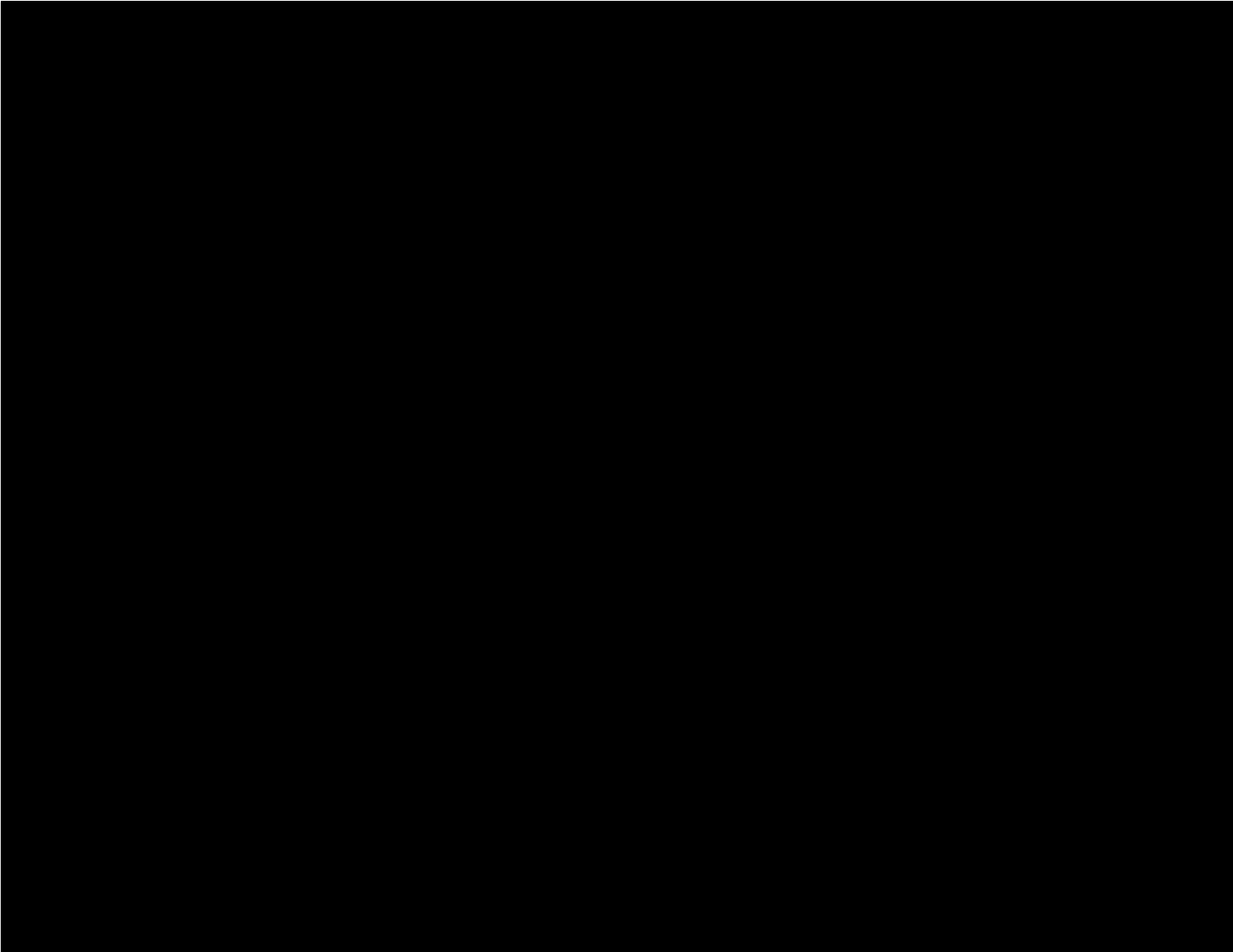
2. In the future Faith Harbor will no longer allow contact with residents by SCG's until all required paperwork has been received, including a 2-step TB clearance. To ensure that similar deficiency does not happen again, Faith Harbor has created a checklist outlining all required documents for all SCG's prior to first contact with the residents (see attached).

Completion Date: April 18, 2015

Vera Popova PCG Vera Popova


11-100.1-10(a) Admission Policies

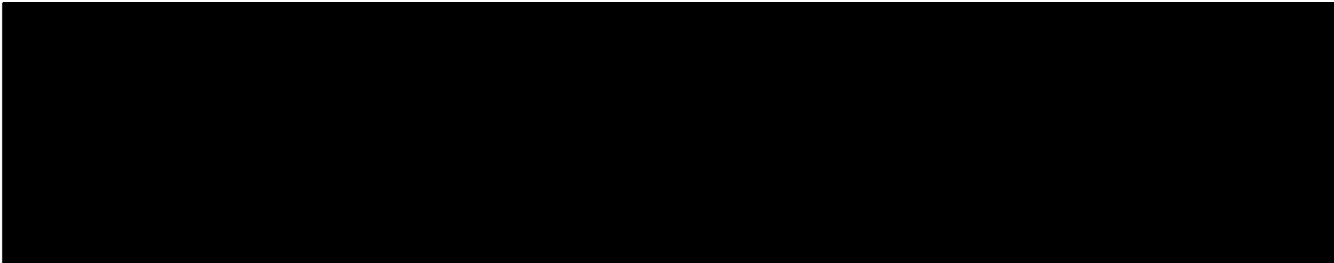
During annual inspection it was discover that Resident #1 had no level of care evaluation at the time of RE-admission on .





1.

2. In the future, progress notes and incident report will be made the same day if an unusual situation occurs, end of the day checklist has been created and posted in the kitchen to remind staff on duty to complete all pertinent paperwork before their shift is over. Moreover we have put another system into practice: since there are substitute caregivers covering various shifts, PCG and SCG are now purposely overlap the last hour of their shift to verbally go over days events, possible changes in residents conditions, and other pertinent information. During that hour, notes and records are checked to make sure all information is properly recorded, and that nothing is overlooked.
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Completion Date: April 24, 2015

Stover PCG Vera Popova

11-100.1-13(d) Nutrition

During annual inspection it was discovered that menu was not posted in the dining area.

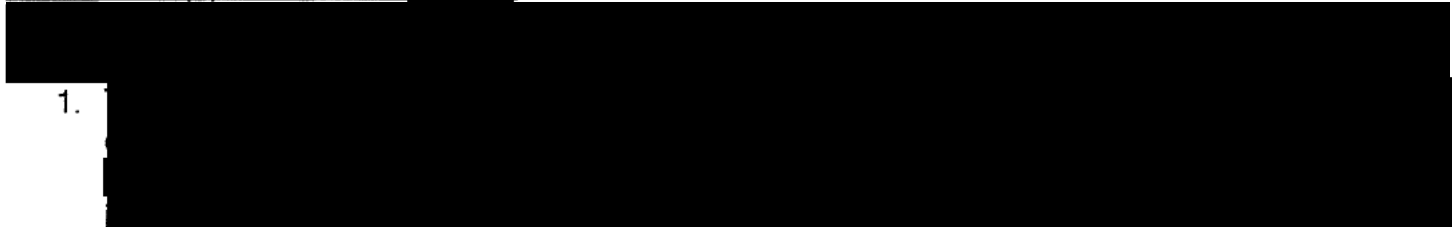
1. One week's menu has now been posted in the dining area, at the time of inspection it was laying on the counter in the kitchen, PCG overlooked placing it on the designated white board, but since then has fixed it.

2. In the future similar deficiency will be avoided by posting the menus in the required area early in the morning, so that's it up for resident's or DOH review if desired.

Completion Date: April 18, 2015

Stover PCG Vera Popova

11-100.1-15(e) Medications



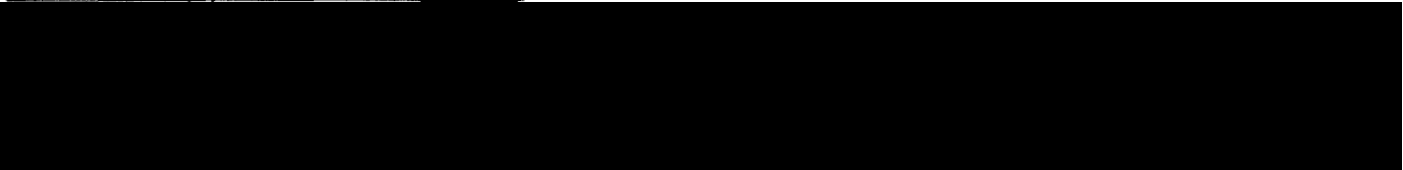
1.

2. In the future similar deficiency will be prevented by filing physicians orders in the resident's binders as soon as those orders are received to make sure they will not be misplaced or lost. Further more, at the end of the month when new MARs (medication administration records) are printed and the previous month's MARs are filed in the residents' binders – medications that were added during the month, or discontinued will be looked over again, to make sure proper paperwork signed by physician has been obtained and filed appropriately in the resident's binder.

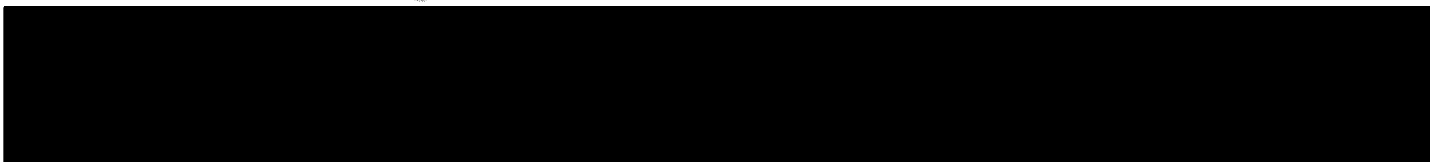
Completion Date: April 24, 2015

Stover PCG Vera Popova

11-100.1-15(e) Medications




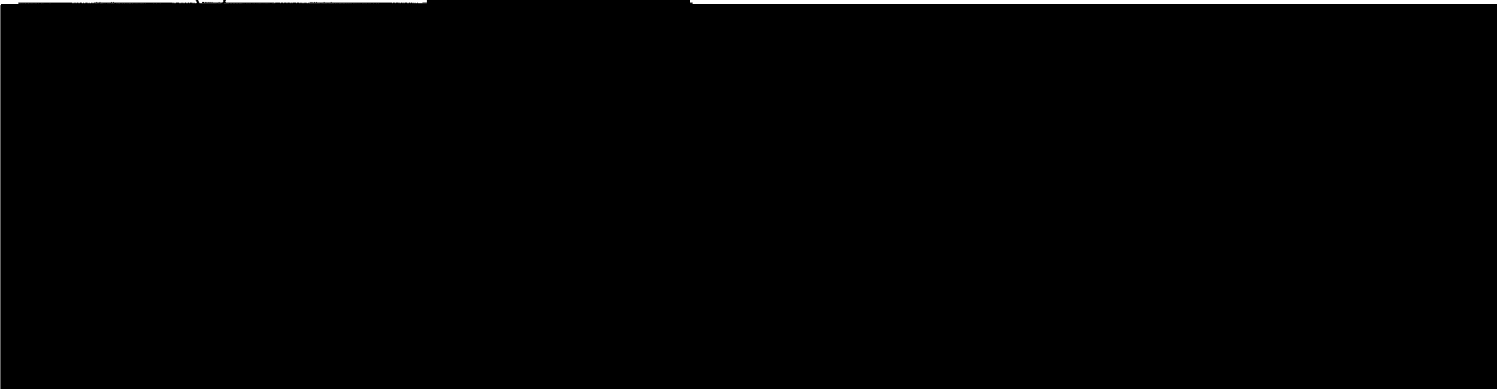
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- 
2. In the future all orders will be written correctly and all dosages shall be copied correctly for the physician to sign so that there is no misunderstanding of the orders. PCG will take time to carefully read medication instructions, and compare it against the physician orders, as well as MAR sheet. All of which should reflect the same instructions, and specifications. If the discrepancies are found, they will be corrected as needed.

Completion Date: April 24, 2015

Vera Popova PCG Vera Popova


11-100.1-15(e) Medications 

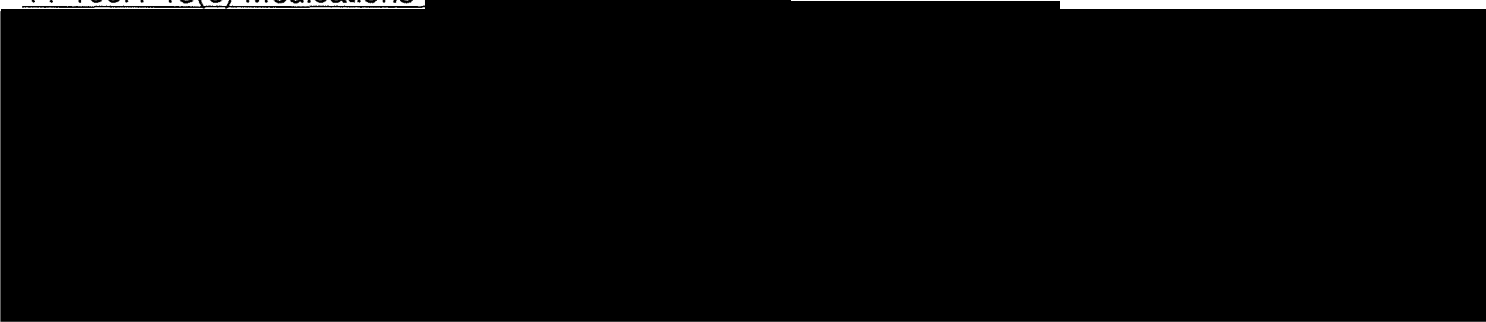


2. To prevent a similar deficiency in the future, whenever new medicine is prescribed and picked up from the pharmacy, it will immediately be added to MAR sheet. Blank spaces are now intentionally left on monthly MARs to allocate space for additional medications as they are being added to the resident's regiments.

Completion Date: April 19, 2015

Vera Popova PCG Vera Popova

11-100.1-15(e) Medications 



2. In the future similar deficiency will be avoided by specifying the dosage, route, and all other pertinent information (even for PRN OTC meds) with doctor at the time the order is received. PCG will check to make sure order is complete with medication name, dosage, route, and

frequency all specified and signed by the doctor.

Completion Date: April 2, 2015

Vera Popova PCG Vera Popova

11-100.1-15(e) Medications "Tylenol"

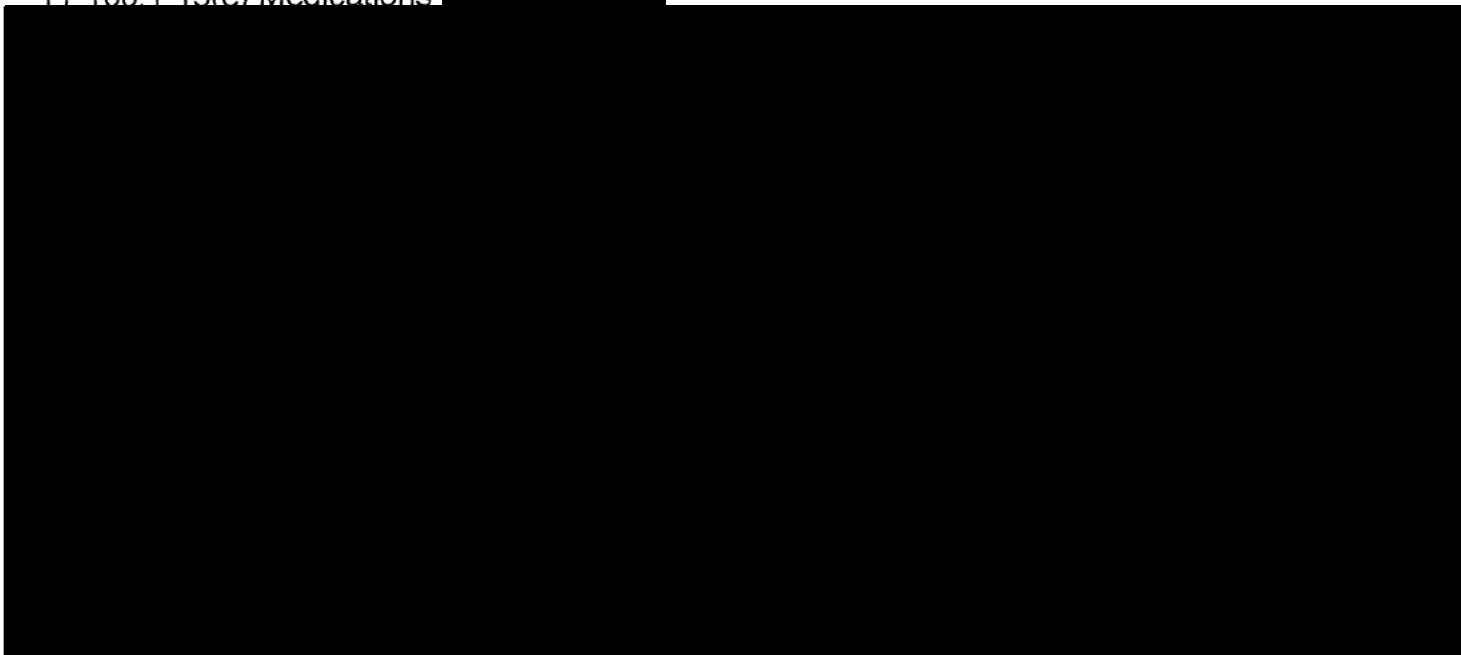
During annual inspection it was discovered that instructions on the [redacted] bottle reflected the original ordered instructions from [redacted] not the most current ones.

1. It was the PCG's understanding by law that no pharmacy label could be changed (even those for OTC). However, once the inspector clarified that OTC medication labels can be changed to reflect the most current doctor's orders, the [redacted] label was changed by adding [redacted] to reflect the most current doctors orders. This deficiency was corrected while the inspector was here for annual inspection on 4/7/15.
2. In the future whenever there is a change in order for an OTC medication, the label will be changed by the PCG to reflect the most current order. If the order changes for a prescription medication the pharmacy will be contacted to obtain a new label or a new refill reflecting the most current order will be obtained.

Completion Date: April 7, 2015

Vera Popova PCG Vera Popova

11-100.1-15(e) Medications [redacted]



2. In the future the PCG will take time to carefully read the medication labels, including all the small warning labels, to follow precautionary measures exactly as specified, and avoid possible medication reactions or side effects.

Completion Date: April 8, 2015

Vera Popova PCG Vera Popova

APR 10 2015
10:00 AM

11-100.1-15(e) Medications [redacted]

No documentation that medication was given on [redacted]

1. [redacted]

2. To prevent similar deficiencies in the future PCG now records the measurements immediately after taking them directly on the MAR. Our MAR sheets now include a vital signs and elimination charts which provide for a convenient place for recording any necessary information, so that scratch paper (which can be easily misplaced) is no longer used.

BP and HR readings issue in regards to [redacted] administering

1. [redacted]

2. To prevent similar deficiency in the future, if we get a medication order which appears unclear, or confusing, prescribing physician or primary physician will be contacted promptly to clarify the order. The instructions will be recorded on the physician/APRN report form the same day the order was received, and submitted to doctor's office for signature via fax promptly. Spare blank Physician/APRN Report forms are now conveniently kept by the

telephone area, which serves as a visual reminder to complete them right away.

Completion Date: April 25, 2015

Homaceef PCG Vera Popova

11-100.1-15(g) Medications

[Redacted]

1. [Redacted]

2. In the future a similar deficiency will be avoided by having the physician review the complete list of medications once every four months. A visual reminder will be placed on the MAR sheet itself for all residents indicating the date of the last medication reevaluation and when the next one is due.

Completion Date: April 25, 2015

Homaceef PCG Vera Popova

11-100.1-17 (a)(1) Records and Reports

[Redacted]

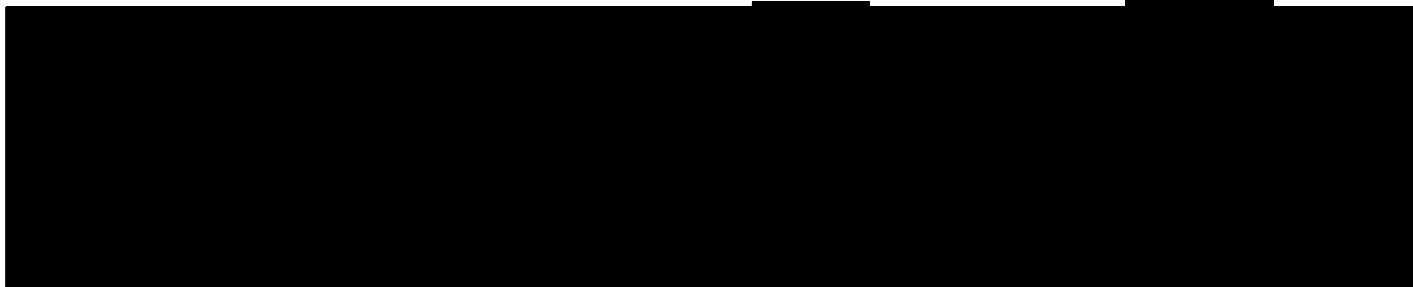
Completion Date: April 25, 2015

Homaceef PCG Vera Popova

11-100.1-17 (a)(6) Records and Reports

[Redacted]

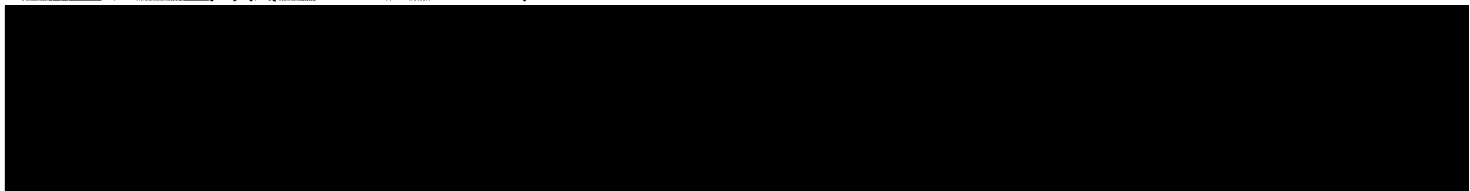
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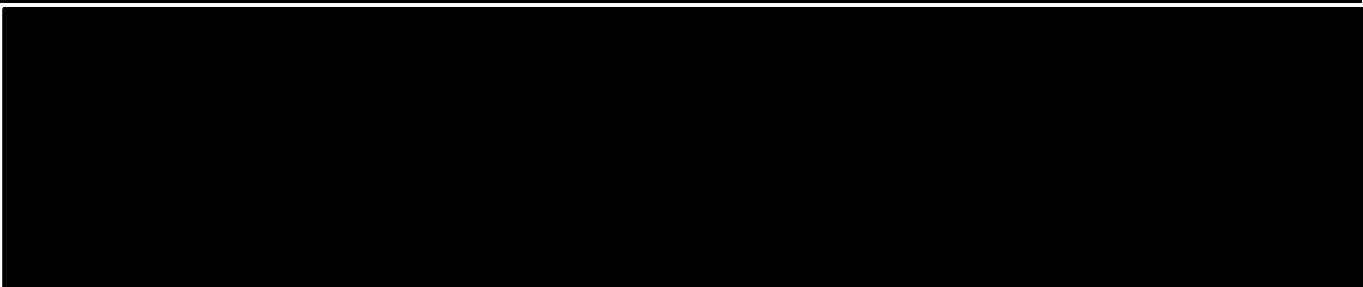
Completion Date: April 25, 2015

Vera Popova PCG Vera Popova

11-100.1-17 (b)(3) Records and Reports



1.

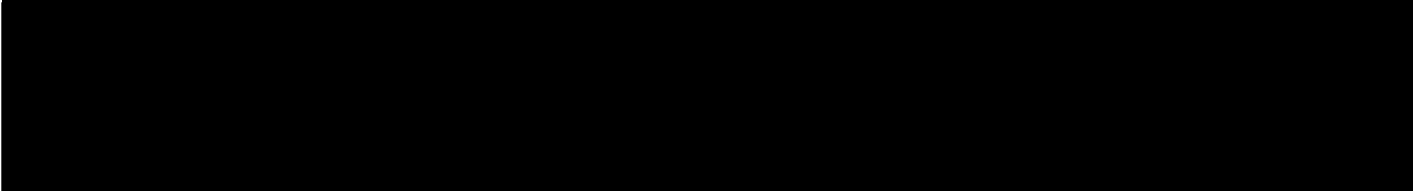


2. In the future similar deficiencies will be avoided by documenting on the same day any changes in the resident's condition, health or mental status, any injury or illness, any changes in behavioral patterns or diet, responses to medication or treatments, or any other incidents. A checklist has been created (see attached) and posted in the kitchen area on the medicine cabinet to remind and outline anything that should be recorded daily. In addition to that, since we now have substitute caregivers covering various shifts. The PCG and SCG are now purposely overlapping the last hour of their shift to verbally go over the day's events. During that hour, notes and records are checked to make sure that all important information is properly recorded in the progress notes, vitals sheet, and MAR.

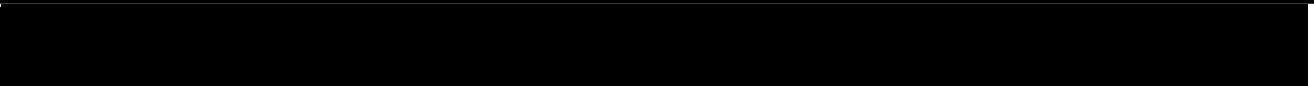
Completion Date: April 26, 2015

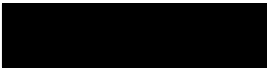
Vera Popova PCG Vera Popova

11-100.1-17 (c) Records and Reports



1.





- 2. In the future similar deficiency will be avoided by initiating an incident report as soon as time permits following an incident, preferably on the same day. Progress notes checklist, which also covers any unusual events/incidents is now posted in the kitchen to remind staff on duty to initiate and complete the incident report promptly.

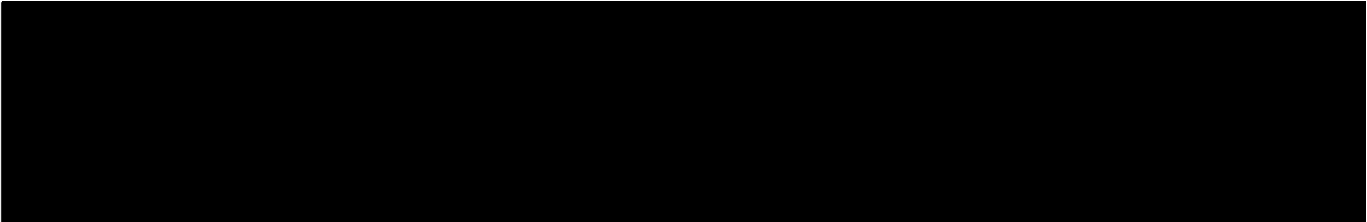
Completion Date: April 25, 2015

Vera Popova PCG Vera Popova

11-100.1-17 (h)(1) Records and Reports



1.



- 2. In the future when a similar incident occurs and the resident leaves the premises and is either admitted into the hospital, or into another facility, or a care of someone else, the general register will be filled out specifying the date and time of the resident's discharge, and if needed a transfer summary and all necessary paperwork will be completed and made available to the receiving party/agency. If the resident chooses to return to our care home, and if the resident's level of care does not exceed our licensing requirements, Faith Harbor will initiate a process of a new admission and obtain all necessary paperwork required. The general registry will reflect the new admission information accordingly.

Completion Date: April 25, 2015

Vera Popova PCG Vera Popova

APR 25 2015
11:53 AM
PCG