

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Manoa Elder Care L.L.C.	CHAPTER 100.1
Address: 2870 Oahu Avenue, Honolulu, Hawaii 96822	Inspection Date: February 19, 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> 	 DON reinforced that when there is a conflict between the ordered medication and prescription label, the ordering physician needs to be notified to clarify the order before administration of the medication. 	3/6/15

Licensee/Administrator's Signature: _____

Print Name: _____

Date: **4/30/15**

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