

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Nita's	CHAPTER 100.1
Address: 98-029 Lii-Ipo Street, Aiea, Hawaii 96701	Inspection Date: February 18, 2015 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-15 Medications. (a) All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms.</p> <p>FINDINGS [Redacted]</p>	<p>In the future, all prescribe medication will be place upon arrival from the pharmacy. to be put in the medication lock cabinet. [Redacted]</p>	<p>2/18/15 (date of correction)</p>

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 STATE OF HAWAII
 DOH-OHCA LICENSES

Licensee/Administrator's Signature: Anita Dominguez

Print Name: ANITA DOMINGUEZ

Date: 04/25/2015