Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Living Manoa Gardens	**CHAPTER 100.1**
Address: **2385 Beckwith Street, Honolulu, Hawaii 96822**	**Inspection Date: May 4 and 5, 2015 Annual**

	Rules (Criteria)	**Plan of Correction**	**Completion Date**
☒	§11-100.1-9 Personnel, staffing and family requirements. (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. **FINDINGS** Substitute care giver [redacted] – No annual physical examination. **Submit a copy with the plan of correction.**	Substitute care giver [redacted] annual physical examination provided. An electronic calendar application has been used to maintain up to date personnel records.	May 4, 2015
☒	§11-100.1-10 Admission policies. (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. **FINDINGS** Resident [redacted] – No level of care at the time of readmission on [redacted]	Level of care obtained for Resident [redacted] The Home's policies have been updated to clarify definition of discharge and admission from the Home. Prior to readmission, the Resident must provide all admission documents to the Home.	July 17, 2015
☒	§11-100.1-13 Nutrition. (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. **FINDINGS** [redacted]	PCG shall document in Progress Notes & Monthly Summary response to diet. The Home is currently consulting with OHCA's [redacted] R.D. to revise its menus to include a special diet addendum.	August 1, 2015
☒	§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. **FINDINGS** [redacted]	The Home has reminded staff about its policies regarding proper storage of medications. The Home has counseled [redacted] a registered pharmacist, that altering labels is contraindication to the Home's OHCA approved policies. The Home has reminded staff about its policies regarding medication labels. The home has created a temporary notification label to remind staff that medication order has changed and to consult the MAR and Physician's order.	May 14, 2015

	[redacted]		
☒	§11-100.1-15 Medications. (c) Separate compartments shall be provided for each resident's medication and they shall be segregated according to external or internal use. **FINDINGS** Resident [redacted] – Topical creams stored with oral medications.	The Home has reminded staff about its policies regarding proper storage of medications.	May 14, 2015
☒	§11-100.1-15 Medications. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN. **FINDINGS** [redacted]	[redacted] The Home has reminded staff about its policies regarding discontinuation of medications. [redacted] The Home has commenced using a MAR Questionnaire (see attached) to be implemented twice per month to catch inconsistencies among the Physician's order, medication orders, and labeled bottles. [redacted] The Home has commenced using a MAR Questionnaire (see attached) to be implemented twice per month to catch inconsistencies among the Physician's order, medication orders, and labeled bottles.	July 17, 2015

	[redacted]	[redacted] The Home has commenced using a MAR Questionnaire (see attached) to be implemented twice per month to catch inconsistencies among the Physician's order, medication orders, and labeled bottles. [redacted] The Home has counseled the PCG to clarify incomplete physician orders.	
☒	§11-100.1-15 Medications. (m) All medications and supplements, such as vitamins, minerals, and formulas, when taken by the resident, shall be recorded on the resident's medication record, with date, time, name of drug, and dosage initialed by the care giver. **FINDINGS** [redacted]	[redacted] The Home has commenced using a MAR Questionnaire (see attached) to be implemented twice per month to catch inconsistencies among the Physician's order, medication orders, and labeled bottles.	July 17, 2015

	physician order for the change.		
☒	§11-100.1-17 Records and reports. (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: Documentation of primary care giver's assessment of resident upon admission; **FINDINGS** Resident [redacted] no admission assessment. Resident [redacted] no admission assessment.	Admission assessments conducted retroactively. The Home's policies have been updated to clarify definition of discharge and admission from the Home.	May 14, 2015
☒	§11-100.1-17 Records and reports. (a)(3) 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: Documentation of date of referral and admission, referral agency with address and telephone number, place or source from which admitted, physician, APRN, dentist, ophthalmologist, optometrist, psychiatrist, and all other medical or social service professionals who are currently treating the resident, next of kin, legal guardian, surrogate or other legally responsible agency; **FINDINGS** Resident [redacted] Resident emergency information sheets were incomplete.	Residents' emergency information sheets updated.	May 5, 2015

☒	§11-100.1-17 Records and reports. (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: Physician or APRN signed orders for diet, medications, and treatments; **FINDINGS** [redacted]	The Home's policies have been updated to clarify definition of discharge and admission from the Home. The Home has counseled PCG to note that hospital discharge summaries and instructions are not acceptable to OHCA without a physician's signature. Prior to readmission, the Resident must provide all admission documents to the Home.	July 17, 2015
☒	§11-100.1-17 Records and reports. (b)(3) During residence, records shall include: 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; **FINDINGS** [redacted]	[redacted]The Home has counseled PCG to include response to diet and supplements in the resident's Monthly Summary [redacted]	June 1, 2015

	2014, July 16, 2014, August 26, 2014, April 30, 2015). [redacted]	[redacted] PCG has commenced recording response to diet in the May 2015 progress notes. The Resident's case manager has updated Care Plan to include feeding interventions.	June 1, 2015
☒	§11-100.1-17 Records and reports. (b)(4) During residence, records shall include: Entries describing treatments and services rendered; **FINDINGS** [redacted]	The Home has counseled PCG to include response to treatments in the progress notes. PCG has commenced recording response to treatments in the May 2015 progress notes.	June 1, 2015
☒	§11-100.1-17 Records and reports. (b)(7) During residence, records shall include: Recording of resident's weight at least once a month, and more often when requested by a physician, APRN or responsible agency; **FINDINGS** [redacted] No weight documented [redacted]	[redacted] The PCG has been counseled to include weight in residents weight log.	May 5, 2015
☒	§11-100.1-17 Records and reports. (h)(1) Miscellaneous records: A permanent general register shall be maintained to record all admissions and discharges of residents;		

	FINDINGS [redacted]	Permanent General Register updated. The Home's policies have been updated to clarify definition of discharge and admission from the Home. The Home has counseled the PCG that the Permanent General Register must be updated upon each admission and discharge.	May 5, 2015
☒	§11-100.1-88 Case management qualifications and services. (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: 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 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; **FINDINGS** Resident [redacted] Nutrition care plan did not include parameters	Care plan updated to include parameters for ideal body weight and providing meals away from main dining area. The Home has reminded Resident's Case Manager of the Chapter requirements for case management services and care plan.	July 17, 2015

	for ideal body weight. [redacted]		
☒	§11-100.1-88 Case management qualifications and services. (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: Update the care plan as changes occur in the expanded ARCH resident care needs, services and/or interventions; **FINDINGS** [redacted]	Care plan updated to include behavior intervention for agitation. The Home has reminded Resident's Case Manager of the Chapter requirements for case management services and care plan.	July 17, 2015

Licensee/Administrator's Signature: [redacted]

Print Name: TODD PANA

Date: 7/17/15

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Living Manoa Gardens	**CHAPTER 100.1**
Address: **2385 Beckwith Street, Honolulu, Hawaii 96822**	**Inspection Date: May 4 and 5, 2015 Annual**

	Rules (Criteria)	**Plan of Correction**	**Completion Date**
☒	§11-100.1-9 Personnel, staffing and family requirements. (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. **FINDINGS** Substitute care giver [redacted] – No annual physical examination. **Submit a copy with the plan of correction.**	Annual physical examination enclosed. Primary and Substitute Care Givers reminded that personnel records must be provided promptly upon request. An electronic calendar has been adopted to maintain up to date personnel records. The electronic calendar notifies Primary Care Giver when personnel records are nearing expiration and/or if any records are missing. The PCG shall be responsible to monitor the calendar monthly and provide evidence in writing. Primary Care Giver will then proceed to obtain new records from substitute care givers with expiring personnel records.	May 4, 2015
☒	§11-100.1-10 Admission policies. (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. **FINDINGS** [redacted]	The Home's policies have been revised to clarify resident discharge and readmission, and the PCG has been counseled on the parameters that are considered resident discharge. With clearer policy on resident discharge, the PCG will know when to conduct readmission procedures and obtain all requisite documents prior to a resident's return to facility.	July 17, 2015
☒	§11-100.1-13 Nutrition. (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. **FINDINGS** [redacted]	PCG shall document in Progress Notes & Monthly Sumary response to diet. The Home consulted with Office's [redacted] R.D. and revised its menus to include a special diet addendum. Upon special diet order, the Home's Consultant Registered Dietitian shall certify the special diet menu and confirm that the facility provides special diet to resident with appropriate documentation. The PCG shall be responsible to review special diet menu with the Consultant Registered Dietitian on a quarterly basis.	August 21, 2015
☒	§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. **FINDINGS** [redacted]	(For all findings related to §11-100.1-15) The Home has commenced using a MAR Questionnaire (see attached) to be implemented twice per month to catch inconsistencies among the Physician's order, medication orders, and labeled bottles. The Home's Registered Nurse and PCG are responsible for ensuring that facility policies on medication management are upheld. In combination with conducting the MAR Questionnaire, The PCG is responsible for identifying medication record inconsistencies on a daily basis. Resident #1 - The Home has reminded staff about its policies regarding proper storage of medications.	May 14, 2015

	[redacted]	[redacted] The Home has reminded staff about its policies regarding medication labels. The home has created a temporary notification label to remind care givers that medication order has changed and they shall consult the MAR and Physician's order prior to passing medication.	
☒	§11-100.1-15 Medications. (c) Separate compartments shall be provided for each resident's medication and they shall be segregated according to external or internal use. **FINDINGS** Resident [redacted] - Topical creams stored with oral medications.	The Home has reminded staff about its policies regarding proper storage of medications.	May 14, 2015
☒	§11-100.1-15 Medications. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN. **FINDINGS** [redacted]	[redacted] The home has created a temporary notification label to remind care givers that medication order has changed and they shall consult the MAR and Physician's order prior to passing medication. [redacted] The home has created a temporary notification label to remind care givers that medication order has changed and they shall consult the MAR and Physician's order prior to passing medication. [redacted] Upon identifying medication inconsistencies between the Physician order and bottle label, the PCG shall obtain confirmation from the Physician.	July 17, 2015

	[redacted]	[redacted] - The Home has suggested [redacted] that pharmacy auto-refill should be discontinued. [redacted] For incomplete physician orders, the Home has adopted a process to confirm Physician's order contains proper dosage and all required order elements.
☒	§11-100.1-15 Medications. (m) All medications and supplements, such as vitamins, minerals, and formulas, when taken by the resident, shall be recorded on the resident's medication record, with date, time, name of drug, and dosage initialed by the care giver. **FINDINGS** [redacted]	July 17, 2015 [redacted] The Home has commenced using a MAR Questionnaire (see attached) to be implemented twice per month to catch inconsistencies among the Physician's order, medication orders, and labeled bottles. The Home's Registered Nurse and PCG are responsible for ensuring that facility policies on medication management are upheld. In combination with conducting the MAR Questionnaire, The PCG is responsible for identifying medication record inconsistencies on a daily basis.

[redacted]

	physician order for the change.		
☒	§11-100.1-17 Records and reports. (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: Documentation of primary care giver's assessment of resident upon admission; **FINDINGS** Resident [redacted] no admission assessment. Resident [redacted] no admission assessment.	The Home's policies have been revised to clarify resident discharge and readmission, and the PCG has been counseled on the parameters that are considered resident discharge. With clearer policy on resident discharge, the PCG will know when to conduct readmission procedures and conduct an admission assessment upon resident's return to facility.	May 14, 2015
☒	§11-100.1-17 Records and reports. (a)(3) 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: Documentation of date of referral and admission, referral agency with address and telephone number, place or source from which admitted, physician, APRN, dentist, ophthalmologist, optometrist, psychiatrist, and all other medical or social service professionals who are currently treating the resident, next of kin, legal guardian, surrogate or other legally responsible agency; **FINDINGS** [redacted] - Resident emergency information sheets were incomplete.	[redacted] The Home has adopted a process for the PCG to check and update residents' emergency information sheets no less than monthly, or more frequently as needed upon changes to resident emergency information.	May 5, 2015

☒	§11-100.1-17 Records and reports. (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: Physician or APRN signed orders for diet, medications, and treatments; **FINDINGS** [redacted]	The Home's policies have been revised to clarify resident discharge and readmission, and the PCG has been counseled on the parameters that are considered resident discharge. With clearer policy on resident discharge, the PCG will know when to conduct readmission procedures and obtain all all requisite documents prior to a resident's return to facility. The Home has counseled PCG that hospital discharge summaries and instructions are not acceptable as orders without a Physician's signature. The PCG will obtain all requisite signed admission documents, in addition to hospital discharge summaries, prior to resident readmission.	July 17, 2015
☒	§11-100.1-17 Records and reports. (b)(3) During residence, records shall include: 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; **FINDINGS** [redacted]	The Home has counseled PCG to include response to special diets, supplements, behavior and interventions in the resident's progress notes. The Home has created a checklist of observations that the PCG must include in all monthly progress notes and Monthly Summaries.	June 1, 2015

	[redacted]	[redacted]	June 1, 2015
☒	§11-100.1-17 Records and reports. (b)(4) During residence, records shall include: Entries describing treatments and services rendered; **FINDINGS** [redacted]	The home has updated the Monthly Summary form to include response to additional treatments ordered by 3rd parties. The Home has counseled PCG to include response to treatments in the resident's progress notes. The Home has created a checklist of observations that the PCG must include in all monthly progress notes and Monthly Summaries.	June 1, 2015
☒	§11-100.1-17 Records and reports. (b)(7) During residence, records shall include: Recording of resident's weight at least once a month, and more often when requested by a physician, APRN or responsible agency; **FINDINGS** Resident [redacted] – No weight documented for [redacted]	[redacted]The PCG has been counseled (and the Home has adopted a process) to include weight in resident weight log with retroactive date for all residents admitted and readmitted after the monthly weigh-in date.	May 5, 2015
☒	§11-100.1-17 Records and reports. (h)(1) Miscellaneous records: A permanent general register shall be maintained to record all admissions and discharges of residents;		

	FINDINGS [redacted]	Permanent General Register updated. The Home's policies have been updated to clarify definition of discharge and admission from the Home. The Home has counseled the PCG that the Permanent General Register must be updated upon each admission and discharge.	May 5, 2015
☒	§11-100.1-88 Case management qualifications and services. (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: 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 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; **FINDINGS** Resident [redacted] Nutrition care plan did not include parameters	(For all sections related to §11-100.1-88) The Home has counseled Resident's Case Manager of the Chapter requirements for case management services and care plan. The Home has developed a checklist of (i) all documents required to be submitted to the Home by Case Managers, (ii) the content of such submittals, and (iii) the frequency of such submittals. The PCG shall be responsible to review the checklist within five (5) days of each periodic deadline, and indicate in writing Case Manager compliance or non-compliance. The Home has adopted a new process for the Case Manager and PCG to review and update care plan to address items on the checklist, in order to ensure that care plan reflects all specific procedures and interventions taken by care givers. [redacted]	July 17, 2015

	for ideal body weight. [redacted]	[redacted]	
☒	§11-100.1-88 Case management qualifications and services. (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: Update the care plan as changes occur in the expanded ARCH resident care needs, services and/or interventions; **FINDINGS** [redacted]	[redacted] The Home has counseled Resident's Case Manager of the Chapter requirements for case management services and care plan. The Home has developed a checklist of (i) all documents required to be submitted to the Home by Case Managers, (ii) the content of such submittals, and (iii) the frequency of such submittals. The PCG shall be responsible to review the checklist within five (5) days of each periodic deadline, and indicate in writing Case Manager compliance or non-compliance. The Home has adopted a new process for the Case Manager and PCG to review and update care plan to address items on the checklist, in order to ensure that care plan reflects all specific procedures and interventions taken by care givers.	July 17, 2015

Licensee/Administrator's Signature: _____

Print Name: _____

Date: _____

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Living Manoa Gardens	**CHAPTER 100.1**
Address: **2385 Beckwith Street, Honolulu, Hawaii 96822**	**Inspection Date: May 4 and 5, 2015 Annual**

	Rules (Criteria)	Plan of Correction	Completion Date
☒	§11-100.1-9 Personnel, staffing and family requirements. (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. **FINDINGS** Substitute care giver [redacted] No annual physical examination. **Submit a copy with the plan of correction.**		
☒	§11-100.1-10 Admission policies. (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		

	[redacted]		
☒	§11-100.1-15 Medications. (c) Separate compartments shall be provided for each resident's medication and they shall be segregated according to external or internal use. **FINDINGS** Resident [redacted] Topical creams stored with oral medications.		
☒	§11-100.1-15 Medications. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN. **FINDINGS** [redacted]		

	[redacted]	[redacted] To prevent future possible oversupply of medications with conflicting labels, residents' families have been coached to consider discontinuing auto-refill for medications with orders that may change To prevent possible caregiver confusion due to multiple bottles of the same medication with conflicting labels: numbered temporary notification labels have been affixed onto existing oversupply of medications with outdated labels. The temporary notification labels remind staff to use remaining medication bottles in sequence, and also reminds staff that because the medication order has changed, staff must consult the MAR and Physician's order prior to passing medication. The Home has commenced using a MAR Questionnaire to be implemented twice per month to catch inconsistencies among the Physician's order, medication orders, and labeled bottles. For medication label and Physician order inconsistencies, the Home has adopted a process to confirm Physician's order is consistent with medication label. The Home's Registered Nurse and PCG are responsible for ensuring that facility policies on medication management are upheld. In combination with conducting the MAR Questionnaire, The PCG is responsible for identifying medication record inconsistencies on a daily basis.	
☒	§11-100.1-15 Medications. (m) All medications and supplements, such as vitamins, minerals, and formulas, when taken by the resident, shall be recorded on the resident's medication record, with date, time, name of drug, and dosage initialed by the care giver. **FINDINGS** [redacted]		

	[redacted]		
☒	§11-100.1-88 Case management qualifications and services. (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: Update the care plan as changes occur in the expanded ARCH resident care needs, services and/or interventions; **FINDINGS** [redacted]		

Licensee/Administrator's Signature: [redacted]

Print Name: TODD PANG

Date: 12/14/15