

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Lydia Quemado (ARCH)	CHAPTER 100.1
Address: 94-1292 Huakai Street, Waipahu, Hawaii 96797	Inspection Date: May 1, 2015 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<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><u>FINDINGS</u> No menu posted in kitchen.</p>		
<input checked="" type="checkbox"/>	<p>§11-100.1-19 <u>Resident accounts.</u> (d) An accurate written accounting of resident's money and disbursements shall be kept on an ongoing basis, including receipts for expenditures, and a current inventory of resident's possessions.</p> <p><u>FINDINGS</u> Resident [REDACTED]</p> <ul style="list-style-type: none"> No resident initials or signature to verify receipt of disbursed funds monthly from the primary care giver (PCG), [REDACTED] 		

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (g)(3)(C) Fire prevention protection.</p> <p>Type I ARCHs shall be in compliance with, but not limited to, the following provisions:</p> <p>Each Type I ARCH shall have a written plan for the safe care and evacuation of residents to areas of refuge in case of emergency. This plan shall be reviewed, and updated as necessary, whenever there is a significant change in the physical or mental condition of a resident or whenever a new resident enters the facility. All personnel shall be instructed in their respective duties in carrying out this plan. The written plan with directional diagrams shall be posted in a conspicuous location within the facility;</p> <p><u>FINDINGS</u></p> <ul style="list-style-type: none"> The posted directional diagram/floor plan indicates Resident Room #1. PCG states that was a family member room and now stores family members possessions. This leaves only Bedroom #2 as a Resident Room. 		
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (o)(2)(A) Bedrooms:</p> <p>Floor space:</p> <p>Minimum usable floor space allowable shall be seventy square feet per bed in a multiple resident bedroom and eighty square feet per bed in a single resident bedroom, excluding toilet, closets, lockers, alcoves, and vestibules. The number of residents shall be limited to a maximum of two;</p>		

	Rules (Criteria)	Plan of Correction	Completion Date
	<p><u>FINDINGS</u></p> <ul style="list-style-type: none"> Two (2) residents in Bedroom #2. However, that bedroom set up with three (3) beds. PCG states it is a three (3) resident room. 		

Licensee's/Administrator's Signature: _____

Print Name: _____

Date: _____