

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: The Arc in Hawaii – Wahiawa B (DDDH)	CHAPTER 89
Address: 140 B Kuahiwi Avenue, Wahiawa, Hawaii 96786	Inspection Date: August 7, 2015 Life Safety August 18, 2015 OHCA Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-12 <u>Structural requirements for licensure.</u> (b) Once licensed, the administrator shall be responsible for ensuring that the facility is maintained in compliance with all state and county zoning, building, fire, sanitation, housing and other codes, ordinances, and laws.</p> <p><u>FINDINGS</u> There was no verification that monthly smoke detector checks were done in March 2015, April 2015, May 2015 and June 2015. (NOTE: During the OHCA's annual inspection, reports for March 2015, April 2015 and June 2015 were available for review.)</p>	See Attachment 1	
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (d)(1) The caregiver shall develop an emergency evacuation plan to ensure rapid evacuation of the facility in the event of fire or other life-threatening situations. The plan shall be posted and shall include a provision for evacuation drills as follows:</p> <p>Evacuation drills shall be held at least monthly and at varied</p>	See Attachment 1	

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>times during the twenty-four hour period. Instruction in the evacuation procedures shall be given to each new resident upon admission to the facility.</p> <p><u>FINDINGS</u> The time that the February 7, 2015 fire drill was conducted was not indicated on the report.</p>		
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (d)(2) The caregiver shall develop an emergency evacuation plan to ensure rapid evacuation of the facility in the event of fire or other life-threatening situations. The plan shall be posted and shall include a provision for evacuation drills as follows:</p> <p>A written record of each drill shall be kept on file.</p> <p><u>FINDINGS</u> There was no verification that fire drills were conducted in March 2015, April 2015, May 2015 and June 2015. (NOTE: During the OHCA's annual inspection, reports for March 2015, April 2015 and June 2015 were available for review.)</p>	<p>See Attachment 1</p>	
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(5) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas shall be made available by written physician order and shall be based upon current evaluation of the resident's condition.</p> <p><u>FINDINGS</u> [REDACTED]</p>	<p>See Attachment 2</p>	

	Rules (Criteria)	Plan of Correction	Completion Date
	update of February 9, 2015.		
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(12) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas, shall have written physician's orders and shall be labeled according to pharmaceutical practices for prescribed items. When taken by the resident, the date, time, name of drug, and dosage shall be recorded on the resident's medication record and initialed by the certified caregiver.</p> <p>FINDINGS</p> 	<p>See Attachment 2</p>	
<input checked="" type="checkbox"/>	<p>§11-89-18 <u>Records and reports.</u> (b)(1) During residence, records shall be maintained by the caregiver and shall include the following information:</p> <p>Copies of physician's initial, annual and other periodic examinations, evaluations, medical progress notes, relevant laboratory reports, and a report of re-examination of tuberculosis;</p> <p>FINDINGS</p> 	<p>See Attachment 2</p>	

Licensee's/Administrator's Signature



Print Name: CRISTINE MENEZES

Date: 9/3/15

Comments/Advisements
§11-89-12 Structural requirements for licensure. (b)

Home staff is given a yearly fire drill schedule that they are required to follow. The check of the smoke detectors is part of the fire drill procedure. Unfortunately they misplaced their May fire drill thus there was no documentation to verify the check of the smoke detectors was completed. Every month, staff is required to submit a copy of their fire drills to the Administration Office and keep the original in the home Compliance Book. The Executive Assistant who receives the fire drills will inform the Director of Programs and Services of the fire drills that are missing for that month. The Director of Programs and Services will contact the home and request a copy. Upon receipt, the section for checking the smoke detectors will be reviewed to ensure its completion. Should the home misplace their fire drill form, they will contact the Executive Assistant and request a copy for their Compliance Book. This will ensure that a complete set is available in the home at all times. **Date of Completion:** September 16, 2015

§11-89-14 Resident health and safety standards. (d)(1)

Home staff is given a yearly fire drill schedule that they are required to follow. The time of the fire drill is included in this schedule. Staff conducted the fire drill however inadvertently missed writing in the time of when it was done. Staff is required to submit a copy of their fire drills to the Administration Office on a monthly basis. Upon receipt, the form will be reviewed to ensure all necessary information is completed. Should the time of the drill be missing, The Director of Programs and Services will contact the home and have them complete the form correctly and resubmit. **Date of Completion:** September 16, 2015

§11-89-14 Resident health and safety standards. (d)(2)

Home staff is given a yearly fire drill schedule that they are required to follow. Every month, staff is required to submit a copy of their fire drills to the Administration Office and keep the original in the home Compliance Book. Unfortunately they misplaced their May fire drill prior to submitting a copy to the Administration Office. The Executive Assistant who receives the fire drills will inform the Director of Programs and Services of the fire drills that are missing for that month. The Director of Programs and Services will contact the home and request a copy. Should the home misplace their fire drill form after submitting a copy to the Administration Office, they will contact the Executive Assistant and request a copy for their Compliance Book. This will ensure that a complete set is available in the home at all times. **Date of Completion:** September 16, 2015

§11-89-14 Resident health and safety standards. (e)(5)

[REDACTED] the new home manager is in the process of being trained to file incoming paperwork promptly under correct headings. The nurse will meet with the home manager at least once a month for the first 6 months of [REDACTED] employment to verify that paperwork has been filed properly and other duties are being performed in an appropriate and timely manner. The home manager will send in an appointment calendar to advise the nurse of appointments and will fax paperwork to the nurse as is current protocol. The nurse will continue her quarterly visits for auditing and will work with the home manager to address any corrections as they arise. **Completion Date:** September 3, 2015

§11-89-14 Resident health and safety standards. (e)(12)

[REDACTED] the new home manager is in the process of being trained to check the incoming medication records to assure that they are accurate. The nurse will meet with the home manager at least once a month for the first 6 months of [REDACTED] employment to assure that records are being kept properly and corrected in a timely manner. The home manager will note any corrections needed for the medication record on the yellow order sheet and return it to the nurse by the second Monday of every month. The nurse will continue her quarterly visits for auditing and will work with the home manager to address any corrections as they arise.

§11-89-18 Records and reports. (b)(1)

[REDACTED] the new home manager is in the process of being trained regarding doctor's visits and obtaining pertinent documentation such as lab results, progress notes, and referrals. Home manager is now aware that a copy of lab results can be sent to the home from the lab rather than waiting for a copy from the physician office. The nurse will continue her quarterly visits for auditing and will work with the home manager to address any corrections as they arise. **Date of Completion:** September 3, 2015

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Licensee's/Administrator's Signature



Print Name: CHRISTINE MENEZES

Date: November 6, 2015