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Office of Health Care Assurance

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State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Medy's ARCH II	CHAPTER 100.1
Address: 1229 Ala Pili Loop, Honolulu, Hawaii 96818	Complaint: June 16, 2015 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (b) All individuals who either reside or provide care or services to residents in the Type I ARCH shall have documented evidence of an initial and annual tuberculosis clearance.</p> <p>FINDINGS No tuberculosis clearance:</p> <ul style="list-style-type: none"> Substitute care giver (SCG) [REDACTED] Submit copy with plan of correction (POC). 	<p>7 Initial and annual TB clearance reports for SCG [REDACTED] obtained. Copies attached.</p> <p>7 In the future all individuals who provide care to residents in the home will have documented initial and annual TB clearance reports with their "Physical Exam Record"</p>	6/17/15
<input checked="" type="checkbox"/>	<p>§11-100.1-21 <u>Residents' and primary care givers' rights and responsibilities.</u> (b)(2)(B) Primary care givers' rights and responsibilities:</p> <p>The primary care giver has the right to:</p> <p>Terminate a resident's agreement for just cause after a written 30 day notice;</p>		

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>FINDINGS Resident [REDACTED] Care home "Agreement" does not comply with Chapter 100.1: Terminate a resident's agreement for just cause after a written 30 day notice.</p>	<p><i>Default in Payment of fees under General Conditions in the Care Home Agreement for resident [REDACTED].</i></p> <p><i>Care Home Agreement will be written to comply with Chapter 100.1 - Terminate a resident's agreement for just cause only after a written 30 day notice.</i></p>	<p><i>6/17/15</i></p>

Licensee's/Administrator's Signature: [REDACTED]

Print Name: Mediatrix De Lara

Date: 2/8/16