

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Beltran, Milagros (ARCH/Expanded ARCH)	CHAPTER 100.1
Address: 94-1382 Henokea Street, Waipahu, Hawaii 96797	Inspection Date: June 12, 2015 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-12 <u>Emergency care of residents and disaster preparedness.</u> (a)(2) The licensee shall maintain written procedures to follow in an emergency which shall include provisions for the following:</p> <p>Arranging for transfer or placement of a resident at an emergency shelter or crisis response unit, as appropriate;</p> <p><b><u>FINDINGS</u></b> Disaster plan did not have current phone number for Civil Defense.</p>	<p>Current phone number of Oahu Civil Defense was obtained immed. upon notice. and updated in my ARCH folder.</p> <p>From now on, every year, on the month of Jan. i will check for any changes of info. in the telephone book's list of "Impt. ER/Disaster Numbers" section, and update accordingly.</p>	June 12, 2015
<input checked="" type="checkbox"/>	<p>§11-100.1-14 <u>Food sanitation.</u> (c) Refrigerators shall be equipped with an appropriate thermometer and temperature shall be maintained at 45°F or lower.</p> <p><b><u>FINDINGS</u></b> Thermometer registered 25 degrees F (refrigerator door). Registered 60 degrees F after on counter after an hour.</p>	<p>Purchased a new refrigerator thermometer on June 22, 2015. Receipt encl.</p> <p>From now on, on every first week of the month, i will check my ref. thermometer to ensure that it is properly working and registering 45°/↓always.</p>	June 22, 2015

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-14 <u>Food sanitation.</u> (e) A metal stem thermometer shall be available for checking cold and hot food temperatures.</p> <p><b>FINDINGS</b> No thermometer in kitchen that registered below 130 degrees F.</p>	<p>A metal stem thermometer was obtained as required, on June 22, 2015. Receipt enclosed.</p> <p>From now on, a met. stem will be avail. to use for hot/cold temp. checks. of food. It will be kept in a designated kitchen drawer.</p>	Jun 22, 2015
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (p)(5) Miscellaneous:</p> <p>Signaling devices approved by the department shall be provided for resident's use at the bedside, in bathrooms, toilet rooms, and other areas where residents may be left alone. In Type I ARCHs where the primary care giver and residents do not reside on the same level or when other signaling mechanisms are deemed inadequate, there shall be an electronic signaling system.</p> <p><b>FINDINGS</b> Very soft sound, barely audible and could not be heard in common areas or upstairs in primary care givers quarters.</p> <ul style="list-style-type: none"> <li>• Bedroom #3 bed #1.</li> <li>• Bedroom #3's bathroom.</li> </ul>	<p>Purchased two new signaling devices with more audible sounds, for Rm. 3 bed #1 and Rm. #3 bathroom. on 6/14/15 Receipt enclosed.</p> <p>From now on, every first week of the month, i will test all of my signaling devices to ensure that all are functioning properly.</p>	Jun 14, 2015

Licensee's/Administrator's Signature: \_\_\_\_\_

Print Name: Milagros Beltran

Date: Feb 11, 2016