

Office of Health Care Assurance

State Licensing Section

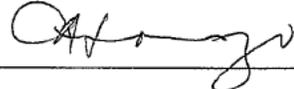
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Lorenzo Care Home, LLC	CHAPTER 100.1
Address: 98-1591 Hoomaike Street, Pearl City, Hawaii 96782	Inspection Date: September 29, 2015 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-14 <u>Food sanitation.</u> (f) Toxic chemicals and cleaning agents, such as insecticides, fertilizers, bleaches and all other poisons, shall be properly labeled and securely stored apart from any food supplies.</p> <p>FINDINGS One (1) bottle of bleach unsecured under the kitchen sink.</p>	<p>THE BOTTLE OF BLEACH IS NOW STORED AND LOCKED IN THE WASHER/DRYER ROOM WITH OTHER CLEANING AGENTS.</p> <p>AFTER EACH USE, I WILL STORE AND LOCK BLEACH AND OTHER HOUSEHOLD CLEANING AGENTS IN OUR WASHER/DRYER ROOM TO PREVENT THIS FROM RECURRING.</p>	9-29-15
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (b)(3) During residence, records shall include:</p> <p>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;</p> <p>FINDINGS</p>	<p>OUR PROGRESS NOTES NOW INCLUDE DOCUMENTATION OF CLIENT'S ROM EXERCISES</p> <p>IT ALSO INCLUDES CLIENT'S RESPONSES</p> <p>TO PREVENT THIS FROM RECURRING,</p>	10-8-15

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>Progress notes indicate lack of clear understanding as to what constitutes Active/Passive ROM simple exercise and the appropriate documentation for responses to Active/Passive ROM simple exercise.</p>	<p>I WILL MAKE SURE CLIENT'S ACTIVITIES ARE RECORDED ON ACTIVITY RECORD AND FOLLOWED BY AN ENTRY ON PROGRESS NOTES IF THERE IS AN ISSUE.</p>	
<input checked="" type="checkbox"/>	<p>§11-100.1-87 <u>Personal care services.</u> (a) The primary care giver shall provide daily personal care and specialized care to an expanded ARCH resident as indicated in the care plan. The care plan shall be developed as stipulated in section 11-100.1-2 and updated as changes occur in the expanded ARCH resident's care needs and required services or interventions.</p> <p>FINDINGS no care giver documentation for implementation of physician order</p> <p>no documentation in resident record for the following:</p> <ol style="list-style-type: none"> 1. Specific training for active and passive ROM; and 2. Active/passive ROM on "Resident Activity Record". 	<p>MY SUBSTITUTES AND I RECEIVED A MORE EXTENSIVE ACTIVE/PASSIVE ROM TRAINING FROM OUR CASE MANAGER ON OCT. 2015. OUR "RESIDENT ACTIVITY RECORD" HAS BEEN MODIFIED AND NOW INDICATES ACTIVE/PASSIVE ROM. WHEN ADMITTING A NEW CLIENT IN THE FUTURE, I WILL WORK WITH MY CASE MANAGER TO MAKE SURE PROPER TRAINING ARE MET FOR ME AND MY SUBSTITUTES. I WILL ALSO MAKE SURE OUR "RESIDENT ACTIVITY RECORD" REFLECTS CLIENT'S ACTIVITIES.</p>	<p>10-8-15</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-88 <u>Case management qualifications and services.</u> (c)(6) Case management services for each expanded ARCH resident shall be chosen by the resident, resident's family or surrogate</p>	<p>THE ROM TRAINING WE RECEIVED FROM OUR CASE MANAGER ON OCT. 2015 INCLUDED ACTIVE AND PASSIVE ROM</p>	<p>10-8-15</p>

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>in collaboration with the primary care giver and physician or APRN. The case manager shall:</p> <p>Coordinate care giver training, hospital discharge, respite, home transfers and other services as appropriate. Facilitate, advocate and mediate for expanded ARCH residents, care givers and service providers to ensure linkages and provision of quality care for the optimal function of the expanded ARCH resident;</p> <p>FINDINGS case manager training dated 1/31/15, did not indicate or ensure care giver understanding as to what constitutes Active/Passive ROM simple exercise" or evidence that "Active/Passive ROM simple exercises" were provided.</p>	<p>EXERCISES TO THE UPPER AND LOWER EXTREMITIES. THESE EXERCISES ARE NOW RECORDED ON OUR "RESIDENT ACTIVITY RECORD". RECALL A DETAILED ENTRY IS MADE ON THE PROGRESS NOTES IF THERE IS AN ISSUE.</p> <p>TO PREVENT THIS FROM RECURRING, I WILL MAKE SURE CLIENT'S ACTIVITIES ARE REFLECTED ON THE "RESIDENT ACTIVITY RECORD" AND FOLLOWED BY AN ENTRY ON PROGRESS NOTES IF NEEDED.</p>	

Licensee's/Administrator's Signature: 

Print Name: CATHERINE LORENZO

Date: August 1, 2016