

Office of Health Care Assurance

State Licensing Section

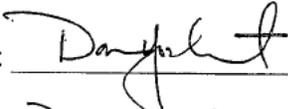
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Regency at Hualalai	CHAPTER 90
Address: 75-181 Hualalai Road, Kailua-Kona, Hawaii 96740	Inspection Date: July 6 & 7, 2016 Biennial

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-90-3 <u>Licensing</u> (o)(10)(D) Applications for licensure shall be made to the department on a form provided by the department and shall include full and complete information as follows:</p> <p>Evidence that the premises comply with state and county building, housing, fire, and other codes, ordinances, and laws for the type of occupancy to be licensed. Compliance shall include but not be limited to the following:</p> <p>Applicable state laws and administrative rules relating to sanitation, health, and environmental safety.</p> <p><b><u>FINDINGS</u></b></p> <ol style="list-style-type: none"> <li>Supplies of kitchen dry storage, boxes of single use cups and plates are stored on the floor.</li> <li>Pool metal door misaligned making the door hard to close and lock.</li> </ol>	<p>PLEASE SEE ATTACHED DOCUMENTATION</p>	<p>July 7, 2016 July 6, 2016</p>

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-90-6 <u>General policies, practices, and administration.</u> (d) The facility shall have written policies and procedures which incorporate the assisted living principles of individuality, independence, dignity, privacy, choice, and home-like environment.</p> <p><b>FINDINGS</b></p> <ol style="list-style-type: none"> <li>1. Resident #2 [redacted] medication ran out [redacted] [redacted] no documentation that family was notified. Policy and procedures 700.041 states that family will be notified when facility has difficulty obtaining a medication. Policy 700.006 states that charting will be done by unlicensed staff when completing the task. Policy and procedures not being followed.</li> <li>2. Resident #3 standing order for [redacted] not on treatment sheet [redacted]. Policy and procedure 700.006 states that the records will be maintained by the med tech to assure all medication is given and recorded. Policy not being followed.</li> </ol>	<p>PLEASE SEE ATTACHED DOCUMENTATION</p>	<p>July 8, 2016  July 8, 2016</p>
<input checked="" type="checkbox"/>	<p>§11-90-7 <u>Inservice education.</u> (2) There shall be a staff inservice education program for the entire staff that includes:</p> <p>Ongoing inservice training on a regularly scheduled basis (minimum of six hours annually).</p> <p><b>FINDINGS</b> Employees #1 &amp; #2 each has only completed one (1) hour of continuing education (CEU). Six (6) hours are required for each employee. <b>Submit five (5) hours of CEU's for each employee with your plan of correction (POC).</b></p>	<p>PLEASE SEE ATTACHED DOCUMENTATION</p>	<p>July 20, 2016</p>

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-90-9 <u>Record and reports system.</u> (a)(1)            The facility shall establish policies and procedures to maintain a system of records and reports which shall include the following:</p> <p>Copy of a current physician or primary care provider's report of resident's physical examination which includes tuberculosis clearance and verification that the resident is free from other infectious or contagious diseases;</p> <p><b><u>FINDINGS</u></b>            Resident #1 history of positive tuberculosis (TB) test in [REDACTED] no TB attestation on record for [REDACTED]. <b>Submit a copy of a current TB attestation form signed by a physician for resident #1 with your POC.</b></p>	<p>PLEASE SEE ATTACHED DOCUMENTATION</p>	<p>July 25, 2016</p>

Licensee's/Administrator's Signature: 

Print Name: DARIN YOSHIMOTO

Date: August 4, 2016

11-90-3 Licensing (o)(10)(D)

Plan of Correction

1. The boxes in the kitchen dry storage were elevated, so they no longer sit directly on the floor. Palates were placed on the floor of the dry storage closet to hold all boxes that do not fit on the shelving units. As stock on the shelves are used, the boxes are rotated to the shelving units. The Dietary Manager will check the dry storage unit 1x/week to ensure compliance, and continue to educate staff that all boxes must be elevated off the floor:

Date of Completion: July 7, 2016

2. The pool metal door was realigned, and closes smoothly and locks. Moving forward, staff will inform the Maintenance Director when they notice that the gate does not closely smooth. Maintenance Director will address issue as a first priority to maintain safety of the pool area. Housekeeping Staff does clean the pool area 2x/week.

Date of Completion: July 6, 2016

11-90-6

Plan of Correction

1. Staff have been in-serviced on policy 700.041 and 700.006, to notify family when the facility has difficulty obtaining a medication, and to also clearly document the task that was completed. In this instance, to specifically document that the family was notified. For Resident #2, please see the community's refill log, staff have documented "notified family", regarding resident's [REDACTED] medication. An in-service was held with the Med Tech's covering policy 700.041 and 700.006, [REDACTED]. Moving forward, Wellness Department will conduct ongoing policy reviews at their monthly Wellness Department meeting. RN and Resident Care Coordinate, also conducts audits of documentation and Medication Administration Record 1x/week.

Date of Completion: July 8, 2016

2. Resident #3's current Treatment Record does have [REDACTED] care order printed. Policy 700.006 was reviewed by Med Techs on July 8, 2016. Community has in place a New Resident Move-In Checklist to use in conjunction with preparing the resident's chart, MARs, and TARs. [REDACTED] The Director of Nursing will review for completion prior to the resident's physical move-in. Included on the checklist is a line item identifying that the community's standing medication and treatment orders have been transcribed, so the Med Techs can assure all medications are given and recorded. The Wellness Department will utilize this checklist in finalizing the new resident's chart, medication administration record, and treatment record.

Date of Completion: July 8, 2016

11-90-7

*JY 8/24/16*

Plan of Correction

Employees #1 and #2 have completed 6 more hours of CEU's, each. [REDACTED]. Following each continuing education session, the Business Office Manager will record each employee's CEU credits for the Inspection Year. The Business Office Manager will communicate with each employee via a written letter, if the employee is failing to make [REDACTED] 6 CEU's toward the end of the Inspection Year. This tracking form will be maintained and reviewed at least 1x/month by the Business Office Manager. The Business Office Manager will also inform the employees direct supervisor if the employee is falling short with CEU's prior to the end of the Inspection Year.

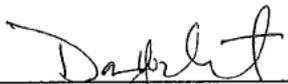
Date of Completion: July 20, 2016

11-90-9

Plan of Correction

A TB attestation was completed for Resident #1 by the community's RN on [REDACTED] and was submitted to resident's primary care practitioner for review. The TB attestation was reviewed, signed by primary care practitioner, and returned to the community on July 25, 2016. The community's TB Skin Test Results form was modified to include a check box stating, "I have reviewed all available TB skin test results, to ensure that, to the best of our knowledge, this individual does not have a positive TB skin test result." [REDACTED] If the individual does have a proof of positive skin test, a TB attestation questionnaire will be completed and submitted to the resident's primary care practitioner for review and final instruction, and requested signature. All employee and resident TB results are kept filed in a specific TB Results binder, in the Wellness Office, and is available for review, prior to the placement of any TB skin test.

Date of Completion: Attestation – 7/15/2016  
Licensed Practitioner Review and Signature – 7/25/2016

  
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Darin Yoshimoto, General Manager  
Regency at Hualalai

August 4, 2016  
Date