

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Maldonado, Elizabeth (ARCH)	CHAPTER 100.1
Address: 2316 Kaha Place, Honolulu, Hawaii 96819	Inspection Date: May 13, 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><b>FINDINGS</b> Household member #2 No annual TB clearance.</p>	<p>In the future CHO will make sure that household member #2 will have annual TB clearance. HHM #2 will give [redacted] physician proper form to fill out.</p> <p><i>CG #1 will review all medical clearances to make sure all forms are up to date.</i></p>	June 03, 2015
		<p><i>Make a checklist &amp; write down reminders on calendar, quarterly. If no clearance done, household members will have no contact with residents until documentation of clearance is given.</i></p>	5-11-16

<input checked="" type="checkbox"/>	<p>§11-100.1-9 <u>Personnel, staffing and family requirements.</u> (e)(4) The substitute care giver who provides coverage for a period less than four hours shall:</p> <p>Be trained by the primary care giver to make prescribed medications available to residents and properly record such action.</p> <p><u>FINDINGS</u> Substitute care giver #1 No documentation of training to make medications available to residents.</p>	<p>Substitute #1 will receive training from PCHO to administer prescribed medication and properly document such as required by department.</p>	<p>June 03, 2015</p>
		<p>CG #1 has shown SCG how to make meds available and how to administer them to all residents. CG #1 will oversee and make any corrections as needed.</p>	
		<p>When I hire a SCHO I will train/document training before they start to work</p>	<p>5-11-16</p>

	Rules (Criteria)	Plan of Correction	Completion Date
☒	<p>§11-100.1-13 <u>Nutrition</u>. (d) Current menus shall be posted in the kitchen and in a conspicuous place in the dining area for the residents and department to review.</p> <p><b>FINDINGS</b> No menu posted in resident dining area.</p>	<p>Menus will be posted in dining area for residents to view and department. In the future, menus will be posted as required by department.</p> <p><i>Menu will be placed on display permanently in dining area and updated as needed.</i></p>	<p>June 03, 2015</p>
		<p><i>Menu posted in dining area</i></p>	<p><i>5-11-16</i></p>
☒	<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><b>FINDINGS</b> Detergent, bleach, fabric softener unsecured in laundry area.</p>	<p>All toxic chemicals cleaning agents, insecticides, fertilizers, bleaches and other poisons will be locked and secured in a locked cabinet. In the future all said items will be secured and locked as required by department.</p> <p><i>All toxic chemicals are now secured in a locked cabinet and when replenished, they will be placed under lock &amp; key.</i></p>	<p>June 02, 2015</p>
		<p><i>When I replenish cleaning supplies, they will be in locked cabinets. When not in use they will be secured.</i></p>	<p><i>5-11-16</i></p>

<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><b>FINDINGS</b> No progress notes to reflect response to PRN [REDACTED] given [REDACTED].</p>	<p>In the future progress notes will be more carefully documented to include responses to medication, treatments, diet, care plan and changes in physical and mental behavior. Documents will include date, time, and any action taken, when incidents occurs.</p> <p><i>CG #1 is keeping better notations of medication reactions or response of residents. Notes to give better explanations and more details.</i></p>	<p>June 01, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (b)(8) During residence, records shall include:</p>	<p><i>Whenever I make PRN meds available, I will document response within 20-30 minutes for response to medication</i></p>	<p>S-11-16</p>
<input checked="" type="checkbox"/>	<p>Notation of visits and consultations made to resident by other professional personnel as requested by the resident or the resident's physician or APRN;</p> <p><b>FINDINGS</b> No progress notes to reflect physician visits [REDACTED].</p>	<p>In the future, progress notes will reflect all visits, and consultations made to physicians, and other professional personnel.</p> <p><i>CG #1 will note all visits from professional personnel and log them in their records in future visitations.</i></p>	<p>June 01, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (g) All information contained in the resident's record shall be confidential. Written consent of the resident, or resident's guardian or surrogate, shall be required for the release of information to persons not otherwise authorized to receive it. Records shall be secured against loss, destruction, defacement, tampering, or use by unauthorized persons. There shall be written policies governing access to, duplication of, and release of any information from the resident's record. Records shall be readily accessible and available to authorized department personnel for the purpose of determining compliance with the provisions of this chapter.</p> <p><b>FINDINGS</b> Resident records stored unsecured in licensee's bedroom.</p>	<p>All residents records will be relocated in a locked file cabinet in licensee's office. All resident's information will be accessible to department personnel upon request and/or authorized persons. In the future secured locked file will be available for inspection.</p> <p><i>a locked file cabinets has been used to keep all residents records secured. Records are only to be seen by authorized personnel only</i></p>	<p>June 01, 2015</p>

<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (g)(3)(B) Fire prevention protection.</p> <p>Type I ARCHs shall be in compliance with, but not limited to, the following provisions:</p> <p>There shall be a clear and unobstructed access to a safe area of refuge;</p>	<p>Locks will be removed permanently upon discharge of resident #4 to another care facility or to [REDACTED] Father. In the future CH operator will screen future residents and not admit any resident that wanders out of the premises. This was not disclosed to CH operator when resident #4 was placed in the home.</p> <p><i>CG #1 has discharged resident than wandered and will not accept any resident that requires locked entries. Gates are no longer locked.</i></p>	<p>June 20, 2015</p>
	<p><b><u>FINDINGS</u></b> Gate in the path to the area of refuge found secured with keyed padlock.</p>		
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (g)(3)(D) Fire prevention protection.</p> <p>Type I ARCHs shall be in compliance with, but not limited to, the following provisions:</p> <p>A drill shall be held to provide training for residents and personnel at various times of the day or night at least four times a year and at least three months from the previous drill, and the record shall contain the date, hour, personnel participating and description of drill, and the time taken to safely evacuate residents from the building. A copy of the fire drill procedure and results shall be submitted to the fire inspector or department upon request;</p> <p><b><u>FINDINGS</u></b> No fire drill documentation [REDACTED].</p>	<p>At time of inspection, records for drills were misplaced in another file and not available for inspection to surveyor, therefore no documents could be documented. In the future CHO will be more careful in keeping all records in proper folders to be available for inspection by department. Records were found and placed in correct folders.</p> <p>In the future CHO will be sure all needed records are ready and in proper folders for inspection.</p> <p><i>Fire drill records have been placed in proper files. CG #1 will review records to be sure they are up to date complete.</i></p>	<p>May 15, 2015</p>
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment.</u> (g)(3)(G) Fire prevention protection.</p> <p>Type I ARCHs shall be in compliance with, but not limited to, the following provisions:</p> <p>Smoke detectors shall be provided in accordance with the most current edition of the National Fire Protection Association (NFPA) Standard 101 Life Safety Code, One and Two Family Dwellings. Existing Type I ARCHs may continue to use battery operated individual smoke detector units, however, upon transfer of ownership or primary care</p>	<p>Smoke detector documentation were in the same folder as the fire drill, and not available for inspection. In the future, CHO will do better in making sure all records for smoke detectors are in the correct folders, and ready at time of inspection.</p>	<p>May 15, 2015</p>

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>giver, such units shall be replaced with an automatic hard wiring UL approved smoke detector system;</p> <p><b>FINDINGS</b> No smoke detector testing documentation [REDACTED]</p>		
<input checked="" type="checkbox"/>	<p>§11-100.1-23 <u>Physical environment</u> (o)(3)(B) Bedrooms:</p> <p>Bedroom furnishings:</p> <p>Each bed shall be supplied with a comfortable mattress cover, a pillow, pliable plastic pillow protector, pillow case, and an upper and lower sheet. A sheet blanket may be substituted for the top sheet when requested by the resident;</p> <p><b>FINDINGS</b> Residents #1, #2, #3, #4 No plastic pillow protector or permanent mark to indicate ownership of pillow.</p>	<p>Plastic covers will be placed over pillow on residents #1, #2, #3, #4, pillows. In the future new pillow will be marked for ownership and/or covered with plastic pillow protectors</p> <p><i>New pillow plastic covers has been placed on pillows and will be changed as needed when worn or damaged</i></p>	June 07, 2015

Licensee/Administrator's Signature: Elizabeth Maldonado

Print Name: Elizabeth Maldonado

Date: June 5, 2015

Licensee/Administrator's Signature: Elizabeth Maldonado

Print Name: Elizabeth Maldonado

Date: 4-4-16

Licensee's/Administrator's Signature: Elizabeth Maldonado

Print Name: Elizabeth Maldonado

Date: \_\_\_\_\_