

Office of Health Care Assurance

State Licensing Section

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

STATE OF HAWAII
 DEPARTMENT OF HEALTH

Facility's Name: ORI - 2B (DDDH)	CHAPTER 89
Address: 64-1510 Kamehameha Highway, Wahiawa, Hawaii 96786	Inspection Date: July 21, 2016 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(5) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas shall be made available by written physician order and shall be based upon current evaluation of the resident's condition.</p> <p>FINDINGS For Resident #1. the physician order of notes, ; however, a prescription of that same date notes the frequency as . The December medication records noted the frequency as,</p>	<p>In the future the case manager will cross check the progress note and the prescription coming from the doctor if the instructions are the same with the prescription, if not ask the doctor right away which one is the right instruction before dropping prescription to the pharmacy for accuracy and for the health & safety of the clients.</p>	8/09/16
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(12) Medications:</p> <p>All medications and supplements, such as vitamins, minerals, and formulas, shall have written physician's orders and shall</p>		

	Rules (Criteria)	Plan of Correction	Completion Date
	<p>be labeled according to pharmaceutical practices for prescribed items. When taken by the resident, the date, time, name of drug, and dosage shall be recorded on the resident's medication record and initialed by the certified caregiver.</p> <p><u>FINDINGS</u></p>	<p>Case manager will continue to work with the caregiver at least twice a month (15th and end of the month) if not daily to ensure all medication is properly administered and medication sheet is signed daily to prevent future reoccurrence of the same mistake. In the future the case manager will ensure that when a client goes to see the doctor for any reason. The case manager will follow-up with the doctor or the APRN if the medication is the same instructions from the progress note and the medication label coming from the pharmacy. In addition the case manager was advised to check all client medications every 15th and end of the month for the accuracy of the medication label and instructions.</p>	<p>8/09/16</p> <p>8/09/16</p>



§11-89-18 Records and reports. (b)(2)
 During residence, records shall be maintained by the caregiver and shall include the following information:

Observations of the resident's response to medication, treatments, diet, provision of care, response to activities programs, indications of illness or injury, unusual skin problems, changes in behavior patterns, noting the date, time and actions taken, if any, which shall be recorded monthly or more often as appropriate but immediately when an incident occurs;

FINDINGS

The frequency and/or time that the given was not indicated. was

In the future case manager will cross check the caregiver's entry on the monthly observation form if all necessary entries are indicated, i.e. if PRN was indicated? If antibiotic was indicated or if date and time were written. In addition case manager will ensure that any incident must be reported to the DOH case manager with an AER report.

8/09/16

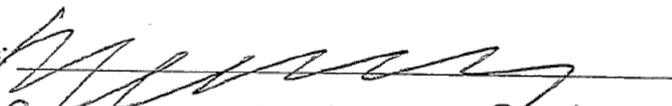
The case manager will continue to work with the caregiver every end of the month for the monthly observation of clients response and treatment for any PRN that being administered to clients to prevent reoccurrence of the same mistake.

8/09/16

On 9/13/16, all staff's received retraining in proper recording procedures for medication administration with emphasis on resident's response to the medication from the Nurse. The Nurse emphasized to the direct care staff's that medication given to the client must indicate the frequency and/or time it is administered. In-service training will continue to be provided by the Nurse to all caregivers on the proper notation and administration of medications. Case manager will continue to monitor direct care staff's periodically and as needed basis to ensure direct care staff's follow the proper recording procedures for medication administrations and monthly observation to all clients.

9/13/16

<input checked="" type="checkbox"/>	<p>§11-89-18 <u>Records and reports.</u> (c) Unusual incidents shall be noted in the resident's progress notes. An incident report of any bodily injury or other unusual circumstances affecting a resident which occurs within the home, on the premises, or elsewhere shall be submitted to the case manager within twenty-four hours from the time of the incident and shall be retained by the facility under separate cover, and shall be made available to the department and other authorized personnel. The resident's physician shall be called immediately if medical care is necessary.</p> <p><u>FINDINGS</u></p> <p>No incident report was available for review.</p>	<p>On 9/13/16, all ORI case managers and caregivers received an in-service training from the Program Director in proper reporting of all incidents resulting to any bodily injury or other unusual circumstances affecting a resident within the facility. The ORI case manager was reminded to immediately inform the resident Physician's if medical care is necessary of any injury to a resident and was also reminded to inform the DOH Case Manager verbally and to submit a written incident report. Regular in-service training will be conducted to all case managers and caregivers to ensure that proper reporting of all unusual circumstances affecting a resident within the facility is reported and documented.</p>	<p>9/13/16</p>
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Licensee's/Administrator's Signature: 
 Print Name: Susanna F. Cheung, President/CEO
 Date: 8/11/2016

Licensee's/Administrator's Signature: Rose M. Fok for
 Print Name: Susanna F. Cheung, President/CEO
 Date: 9-15-2016