

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: RCH – Kapalama (DDDH)	CHAPTER 89
Address: 1330 Halona Street, Honolulu, Hawaii 96817	Inspection Date: May 7, 2016 Life Safety June 24, 2016 Annual

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-8 <u>Provision for services and review.</u> (d) All certified caregivers shall upgrade their skills by taking a minimum of eight hours, per year, of workshop or inservice programs approved by the division as a part of the requirement for the annual recertification.</p> <p>FINDINGS According to the Personnel/Household Members Information form, annual training for the certified caregiver was last completed on May 27, 2015.</p>	<p>11-89-8(d): A typo was noted for the year and date. The annual training was met on July 06, 2015. Procedures were revised for additional oversight before submission to DOH OHCA. The RCH Administrative Office Assistant was in-serviced on the revised procedures. The Director of Program Operations will monitor to ensure compliance.</p>	07/15/16
<input checked="" type="checkbox"/>	<p>§11-89-12 <u>Structural requirements for licensure.</u> (b) Once licensed, the administrator shall be responsible for ensuring that the facility is maintained in compliance with all state and county zoning, building, fire, sanitation, housing and other codes, ordinances, and laws.</p> <p>FINDINGS There was no annual inspection for the fire extinguisher. It was last checked in March 2015.</p>	<p>11-89-12(b): The annual inspection of the fire extinguisher was completed on June 2016. The Director of Program Operations arranged for the company responsible to complete on an annual basis. The Parent Counselor will monitor expiration dates and the Service Supervisor will monitor to ensure compliance.</p>	07/15/16

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-13 <u>Residents' rights.</u> (a) Written policies and procedures addressing the rights of residents during their stay in the facility shall be established and shall be made available to the resident, guardian, next of kin, responsible agency, and the public. It shall be the right of each resident admitted to the facility to:</p> <p><u>FINDINGS</u> For Resident #1, there was no verification that policies and procedures addressing rights were made available to the legal guardian upon admission.</p>	<p>11-89-13(a): The Guardian Representative for Resident #1 signed and acknowledged the policies & procedures of the individual's rights on April 02, 2016. A copy of the signed form is on file. Procedures have been revised to ensure the form is on file at the home; The Service Supervisor will monitor to ensure compliance.</p>	07/15/16
		<p><u>11-89-13(a):</u> A checklist was created identifying the records documentation required and the RCH staff responsible for ensuring the completion and filing of the document. The Director of Program Operations in-serviced the Service Supervisor on the revised procedures and requirements. The Service Supervisor will monitor during monthly on-site visits to ensure compliance.</p>	09/14/16



§11-89-14 Resident health and safety standards. (e)(12)

Medications:

All medications and supplements, such as vitamins, minerals, and formulas, shall have written physician's orders and shall 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.

FINDINGS

11-89-14(e)(12): The Parent Counselor and the Nurse updated the February 2016 medication record sheet to reflect the change.

The Parent Counselor and the Nurse reviewed the standards and revisions were made to procedures for additional oversight of the medication records sheet and Physician's Orders. The Nurse and Parent Counselor will implement to ensure compliance.

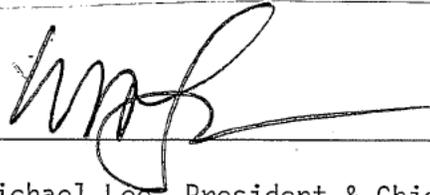
07/15/16

11-89-14(e)(12): The Nurse and Parent Counselor will review during monthly on-site visits the medication record sheets and the physician's orders to ensure compliance. The Nurse and the Parent Counselor will document findings in the Interdisciplinary Team Progress Record and remediate notations

with the Pharmacist and notate on the medication record sheet. The Nurse will also notate on the draft of the 90 Day Update form to ensure consistency of current orders.

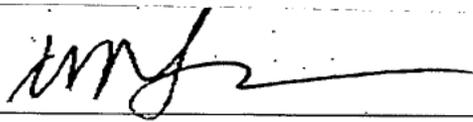
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<input checked="" type="checkbox"/>	<p>§11-89-17 <u>General operational policies.</u> (b) Upon admission, there shall be written documentation that the</p>	<p>11-89-17(b): The Guardian Representative</p>	
	<p>resident, guardian, or next of kin was fully informed of policies governing the resident's care.</p> <p>FINDINGS For Resident #1, there was no verification that upon admission, the legal guardian was informed of policies governing care.</p>	<p>for Resident #1 signed and acknowledged the RCH DD DOM Home policies and Resident's Rights and Responsibilities for the home on April 02, 2015. A copy of the signed form is on file. Procedures have been revised to ensure the form is on file at the home upon admission. The Service Supervisor will monitor to ensure compliance.</p>	<p>07/15/16</p>
		<p>11-89-17(b): A checklist was created identifying the records documentation required and the RCH staff responsible for ensuring the completion and filing of the document. The Director of Program Operations in-visited the Service Supervisor on the revised procedures and filing requirements. The Service Supervisor will monitor during monthly on-site visits and document on the on-site supervision form to ensure compliance.</p>	<p>09/14/16</p>

Licensee's/Administrator's Signature: 

Print Name: W. Michael Lee, President & Chief Executive Officer

Date: July 27, 2016

Licensee's/Administrator's Signature: 

Print Name: W. Michael Lee, President & Chief Executive Officer

Date: 9/14/16