

Office of Health Care Assurance

State Licensing Section

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

<b>Facility's Name:</b> Felarca Care Home	<b>CHAPTER 100.1</b>
<b>Address:</b> 4679 Likini Street, Honolulu, Hawaii 96818	<b>Inspection Date: March 16, 2017 – Annual Inspection</b>

**THIS PAGE MUST BE SUBMITTED WITH YOUR PLAN OF CORRECTION. IF IT IS NOT, YOUR PLAN OF CORRECTION WILL BE RETURNED TO YOU, UNREVIEWED.**

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	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-10 <u>Admission policies. (g)</u> An inventory of all personal items brought into the Type I ARCH by the resident shall be maintained.</p> <p><b><u>FINDINGS</u></b> Inventory of Resident #1 personal items not updated since 2015.</p>	<p align="center"><b>PART 1</b> <b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p align="center"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>Confirmed inventory of Resident # 1's personal belongings. Items did not change during last audit prior to annual inspection 2015. Upon completion of annual 2016, audit confirmed zero (0) items were added or subtracted and caregiver did not log into record prior to annual inspection 2016 of no change to resident #1's belongings.</p>	<p>03/23/2017</p>

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<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications.</u> (a)  All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms.</p> <p><b><u>FINDINGS</u></b>  Medication label inconsistent with physician order. Physician order for Multivitamin states "Take 1 tablet by mouth, once daily." Medication label reads, "Take 1 tablet by mouth once daily, three times a week."</p>	<p style="text-align: center;"><b>PART 1</b>  <b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>Called physician to verify medication orders and discussed that labeled does not match physician orders. Ask to clarify so that pharmacy can correct error to match physician orders are re-issue corrected label. Brought errored bottle with medication to pharmacy to verify error and relabel with corrected action label.</p>	<p>03/23/2017</p> <p style="text-align: right;">RECEIVED</p>

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☒	<p>§11-100.1-15 <u>Medications.</u> (a)  All medicines prescribed by physicians and dispensed by pharmacists shall be deemed properly labeled so long as no changes to the label have been made by the licensee, primary care giver or any ARCH/Expanded ARCH staff, and pills/medications are not removed from the original labeled container, other than for administration of medications. The storage shall be in a staff controlled work cabinet-counter apart from either resident's bathrooms or bedrooms.</p> <p><b><u>FINDINGS</u></b>  Medication label inconsistent with physician order. Physician order for Multivitamin states "Take 1 tablet by mouth, once daily." Medication label reads, "Take 1 tablet by mouth once daily, three times a week."</p>	<p style="text-align: center;"><b>PART 2</b>  <b><u>FUTURE PLAN</u></b></p> <p style="text-align: center;"><b>USE THIS SPACE TO EXPLAIN YOUR  FUTURE PLAN: WHAT WILL YOU DO TO  ENSURE THAT IT DOESN'T HAPPEN AGAIN?</b></p> <p>In the future, PCG or SCG will review all drugs and labels at time of medication pick-up from pharmacy so that it matches "physician's orders." During physician visits, resident's MAR will be reviewed to assure care giver is following physician's orders to resident's medication orders and that pharmacy is in compliance to physician's orders. PCG will also confer with SCG's that label on current bottle does conform to physician's orders on record whenever a refill of drug is performed.</p>	<p style="text-align: center;">03/23/2017</p>

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	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-17 <u>Records and reports.</u> (f)(4) General rules regarding records:</p> <p>All records shall be complete, accurate, current, and readily available for review by the department or responsible placement agency.</p> <p><b><u>FINDINGS</u></b> Resident #1 emergency information sheet inaccurate. Emergency information sheet states Quetiapine is taken at bedtime. The physician order states that Quetiapine should be taken at bedtime, on an as needed basis only.</p>	<p><b>PART 1</b> <b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>Updated Resident #1's Emergency Information sheet to state that Quetiapine is now a PRN medication and not a daily scheduled drug.</p>	<p>03/16/2017</p> <p><b>RECEIVED</b></p>

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Licensee's/Administrator's Signature: *Daniel V. Felarca*  
Print Name: Daniel V. Felarca / *ESSIE FELARCA*  
Date: 05/19/2017

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