

Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

Facility's Name: Ligaya Navasca Dom Home, LLC (DDDH)	CHAPTER 89
Address: 99-058 Upapalu Drive, Aiea, Hawaii 96701	Inspection Date: December 28, 2016 Annual

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

DR. SAHARAN
77-1-17 P1:10

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-14 <u>Resident health and safety standards.</u> (e)(6) Medications:</p> <p>All physician orders shall be re-evaluated and signed by the physician every three months or at the next physician's visit, whichever comes first.</p> <p>FINDINGS For Resident #1, the medication update for Tab-a-Vite, Promethazine-Codeine and Pseudoephedrine 30 mg tab was untimely from August 19, 2016 to December 24, 2016.</p>	<p>Correcting the deficiency after-the-fact is not practical/appropriate. For this deficiency, only a future plan is required.</p>	

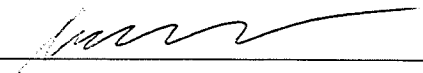
	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	RULE #11-89-14(e)(6)	<p style="text-align: center;">PART 2</p> <p style="text-align: center;"><u>FUTURE PLAN</u></p> <p style="text-align: center;">USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p><i>To avoid this to happen again, I need to make an appointment for their next follow up checkup for 3 months or earlier. I need to mark it on my calendar that resident #1 will have a follow-up check up for the next three months.</i></p> <p style="text-align: right;"><i>Ligaya Navas CA</i></p>	<p style="text-align: right;">4/7/2019 11:10</p>

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-18 <u>Records and reports.</u> (g)(1) Miscellaneous records:</p> <p>A permanent general register shall be maintained to record all admissions and discharges of residents;</p> <p><u>FINDINGS</u> Resident #1 was placed into respite from December 6 – 10, 2016 and Residents #2 - #4 were placed into respite from December 1 – 15, 2016; however, this was not reflected on the Admission/Discharge Registry.</p>	<p style="text-align: center;">PART 1</p> <p style="text-align: center;"><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p style="text-align: center;">USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p><i>When it was brought to my attention, I immediately reflected on the Admission/Discharge Registry the dates when Residents #1, #2, #3 & #4 were placed into respite.</i></p> <p style="text-align: right;"><i>[Signature]</i> LIGAYA NAUNSCA 1/8/17</p>	<p style="text-align: right;"><i>12/28/16</i></p>

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>RULE #11-89-18(g)(1)</p> <p><u>FINDINGS</u> Resident #1 was placed into respite from December 6 – 10, 2016 and Residents #2 - #4 were placed into respite from December 1 – 15, 2016; however, this was not reflected on the Admission/Discharge Registry.</p>	<p>PART 2</p> <p><u>FUTURE PLAN</u></p> <p>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p><i>To avoid these things to happen again, I need to develop a log or things that needs to be done. or another caregiver will double check my work.</i></p> <p><i>Maria</i> <i>LIGAYA NAVASCA 2/8/17</i></p>	<p><i>12/28/16</i></p> <p><i>2/8/17</i></p>

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>§11-89-18 <u>Records and reports.</u> (g)(1) Miscellaneous records:</p> <p>A permanent general register shall be maintained to record all admissions and discharges of residents;</p> <p><u>FINDINGS</u> Resident #5 was discharged from the DDDH in 2016; however, the date of discharge was not reflected on the Admission/Discharge Registry.</p>	<p>PART 1</p> <p><u>DID YOU CORRECT THE DEFICIENCY?</u></p> <p>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</p> <p><i>when it was brought to my attention, I immediately reflected on the Admission / Discharge Registry the date of discharge of Resident #5.</i></p> <p><i>LIGAYA NAUASCA 2/8/17</i></p>	<p><i>12/28/16</i></p>

	Rules (Criteria)	Plan of Correction	Completion Date
<input checked="" type="checkbox"/>	<p>RULE #11-89-18(g)(1)</p> <p><u>FINDINGS</u> Resident #5 was discharged from the DDDH in 2016; however, the date of discharge was not reflected on the Admission/Discharge Registry.</p>	<p>PART 2</p> <p><u>FUTURE PLAN</u></p> <p>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN'T HAPPEN AGAIN?</p> <p><i>To avoid this to happen again, I need to develop a log on the things that needs to be done when discharging a Resident. or I will let someone or another caregiver to double check or review my work.</i></p> <p><i>[Signature]</i> LIGAYA NAVASCA 2/8/17</p>	<p><i>12/28/17</i></p>

Licensee's/Administrator's Signature: 

Print Name: LIGAYA NAUASCA

Date: 2/8/17

17 11:09 PM:10
DANIELA LIBRERO