

	Rules (Criteria)	Plan of Correction	Completion Date
<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>FINDINGS Resident #1 - Progress notes (1/24/17) reflected: ... "went to see internal doctor for 4 month follow up. After... showing buttocks skin to doctor..." Topical medication ordered; however, there was no documentation of the appearance of the buttocks redness or response to the medication.</p> <p style="text-align: right;">DH-CHCA LICENSE #11153017 07-22-17</p>	<p style="text-align: center;">PART 1 <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 put "Late Entry" in Resident #1 Progress notes (please see attached progress notes 1/24/17 for Resident #1) to state noticing the buttocks skin problem (redness) explaining to resident #1 and Encourage her walk more often, Applying topical medication as no order after doctor checkup. Also I put "late Entry" in Resident #1 progress Notes to state the response to the medication on 1/27/17. please see attached progress note. Her buttocks skin seems less red, size is smaller. Skin is intact, no hurting.</p>	<p style="text-align: right;">3/3/17</p>

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<input checked="" type="checkbox"/>	<p>RULE # §11-100.1-17 (b)(3)</p> <p><u>FINDINGS</u> Resident #1 - Progress notes (1/24/17) reflected: ..."went to see internal doctor for 4 month follow up. After...showing buttocks skin to doctor..." Topical medication ordered; however, there was no documentation of the appearance of the buttocks redness or response to the medication.</p>	<p align="center">PART 2 <u>FUTURE PLAN</u></p> <p 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>In the future, I'll write down all the observation of condition change, illness etc, including date, time, action taken, results after treatment right away. I'll do my best to follow the regulation of Chapter 11-100.1.</i></p>	<p align="right"><i>3/3/17</i></p> <p align="right">DUI-0104 LICENSE M12.07</p>

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<input checked="" type="checkbox"/>	<p>RULE # §11-100.1-17 (b)(3)</p> <p><u>FINDINGS</u> Resident #1 - "Sorbitol 70% Misc soln 30 ml PRN for no BM in 2 days" ordered; however, no documentation that the resident did not have bowel movements for two (2) days prior to receiving the Sorbitol.</p> <p style="text-align: right;">DH-CHCA LICENSING 10-2-07</p>	<p style="text-align: center;">PART 2 <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 style="text-align: center;"><i>In the future, I'll pay 3/3/17 close attention to write down changes of condition, resident's response to medication, treatment etc. to follow regulations of Chapter 1100.1.</i></p> <p style="text-align: center;"><i>Thank my inspector to find my deficiency and give me change to correct them!</i></p>	

Licensee's/Administrator's Signature: *M. J. [unclear]*
Print Name: Yaying Liao
Date: 4/2/2017

DRIVER'S LICENSE

4/2/17